

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000059987

Entity Name: TRANSCARE PLUS, INC.

Current Principal Place of Business:

5098 WOODBINE ST
SPRING HILL, FL 34608

Current Mailing Address:

PO BOX 15794
BROOKSVILLE, FL 34604

FEI Number: 46-3221722

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOTO, JUAN R
5098 WOODBINE ST
SPRING HILL, FL 34608 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PS	Title	VPT
Name	SOTO, JUAN R	Name	STEFANY, EDMUNDO B
Address	5098 WOODBINE ST	Address	10451 CHALMER ST
City-State-Zip:	SPRING HILL FL 34608	City-State-Zip:	SPRING HILL FL 34609

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDMUNDO STEFANY

VP

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date