

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000038781

**Entity Name:** CHRISTIAN NURSING CARE INC

**Current Principal Place of Business:**

291 PORTER ST  
NAPLES, FL 34113

**Current Mailing Address:**

291 PORTER ST  
NAPLES, FL 34113 US

**FEI Number:** 82-5415997

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DEGASPERIS, RONALD  
1852 B 40TH TER SW  
NAPLES, FL 34116 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:** RONALD DEGASPERIS

04/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name VETRONE, SHIRLEY  
Address 291 PORTER ST  
City-State-Zip: NAPLES FL 34113

*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:** SHIRLEY VETRONE

PRES

04/28/2021

Electronic Signature of Signing Officer/Director Detail

Date