

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 292113

Entity Name: AG-CARE, INC.

FILED
Apr 18, 2011
Secretary of State

Current Principal Place of Business:

2849 LUST RD.
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

2849 LUST RD.
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-1590288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, WILLIAM D SR.
2849 LUST ROAD
APOPKA, FL 32807 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: LONG, WILLIAM D SR.
Address: 2849 LUST ROAD
City-St-Zip: APOPKA,, FL 32703

Title: VD
Name: SCOTT, FRANK D
Address: R 1 BOX 110
City-St-Zip: MT DORA,, FL

Title: SD
Name: LONG, BARBARA R
Address: 2860 NEIL ROAD
City-St-Zip: APOPKA,, FL 32703

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: WILLIAM D. LONG, SR.

P

04/18/2011

Electronic Signature of Signing Officer or Director

Date