2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008
Secretary of State

DOCUMENT# 763909

Entity Name: BIG PINE COMMUNITY CARE, INC.

Current Principal Place of Business:

1220 WILLIS AVENUE
DAYTONA BEACH, FL 321142810

New Principal Place of Business:

Current Mailing Address:

1220 WILLIS AVENUE
DAYTONA BEACH, FL 321142810

New Mailing Address:

FEI Number: 59-2201208 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMPSON, SCOTT S ESQ.
595 W. GRANADA BLVD.
A
ORMOND BEACH, FL 32174 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: MR ( ) Delete
Name: FOXMAN, S. JAMES
Address: 124 RIVERSIDE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MR ( ) Delete
Name: STONE, RICK
Address: 290 PARRULLI DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: MS ( ) Delete
Name: CORBYONS, MARIAN
Address: 525 LAKE WINNEMISSETT DRIVE
City-St-Zip: DELAND, FL 32734

Title: MS ( ) Delete
Name: ZEIDWIG, DIANE
Address: 324 E. CHURCH STREET
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MR. (X) Change ( ) Addition
Name: LENNARTZ, JOSEPH
Address: 1219 DUNN AVENUE
City-St-Zip: DAYTONA BEACH, FL 32120

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICK STONE MR. 02/14/2008

Electronic Signature of Signing Officer or Director — Date