

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006065

FILED
Jan 31, 2012
Secretary of State

Entity Name: CARESOURCE, INC.

Current Principal Place of Business:

7071 WEST COMMERCIAL BLVD
SUITE 2-D
FT LAUDERDALE, FL 33319

New Principal Place of Business:

Current Mailing Address:

7071 WEST COMMERCIAL BLVD
SUITE 2-D
FT LAUDERDALE, FL 33319

New Mailing Address:

FEI Number: 65-1059938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, KNYVETT
7071 WEST COMMERCIAL BLVD
SUITE 2-D
FT LAUDERDALE, FL 33319 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: LEE, KNYVETT
Address: 7071 W COMMERCIAL BLVD, STE 2-D
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: VP
Name: GERBASI, STELLA
Address: 7071 W COMMERCIAL BLVD, STE 2-D
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: S
Name: SMERKERS, DOLORES J
Address: 7071 W COMMERCIAL BLVD, STE 2-D
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: T
Name: GOODMAN, THERESA
Address: 7071 W COMMERCIAL BLVD, STE 2-D
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: VPF
Name: MORALES, LILIAN I
Address: 7071 W COMMERCIAL BLVD, STE 2-D
City-St-Zip: FORT LAUDERDALE, FL 33319

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOLORES SMERKERS

S

01/31/2012

Electronic Signature of Signing Officer or Director

Date