2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005943

FILED Mar 21, 2011 Secretary of State

Entity Name: NORTHEAST FLORIDA BUILDERS ASSOCIATION BUILDERS CARE, INC.

Current Principal Place of Business:

New Principal Place of Business:

103 CENTURY 21 DRIVE STE 108 JACKSONVILLE, FL 32216

Current Mailing Address:

New Mailing Address:

103 CENTURY 21 DRIVE STE 108 JACKSONVILLE, FL 32216

103 CENTURY 21 DRIVE SUITE 108

JACKSONVILLE, FL 32216

FEI Number: 59-3742789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILSON, WILLIAM R 103 CENTURY 21 DRIVE STE 108 JACKSONVILLE, FL 32216

SIMONS, CHRISTOPHER A 103 CENTURY 21 DRIVE - STE 108 JACKSONVILLE, FL 32216

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: CHRISTOPHER A. SIMONS, DIRECTOR

03/21/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

KUESTER, KEN Name: Address: P O BOX 12267

City-St-Zip: JACKSONVILLE, FL 322090267

Title:

Name: BURNAM, R LAVON

Address: 5011 GATE PARKWAY BLDG 100 SUITE 300

City-St-Zip: JACKSONVILLE, FL 32256

Title: VC

ROVER, GENE Name:

2232 CORPORATE SQUARE BLVD Address: City-St-Zip: JACKSONVILLE, FL 32216

Title:

WALTON, BOBBY

Name: 4348 SOUTHPOINT BLVD Address: City-St-Zip: JACKSONVILLE, FL 32216

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: CHRISTOPHER A. SIMONS, DIRECTOR

D

03/21/2011