

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009021

FILED
Jul 07, 2010
Secretary of State

Entity Name: MOTHER'S CARE HOME FOR CHILDREN, INC.

Current Principal Place of Business:

5735 W GULF TO LAKE HWY
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

Current Mailing Address:

P O BOX 513
CRYSTAL RIVER, FL 34423

New Mailing Address:

FEI Number: 20-0313013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIESING, ELAINE M
5181 EL PASO TERRACE
34465
CRYSTAL RIVER, FL 34429 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: D
Name: SMITH, REBECCA
Address: 5735 W GULF TO LAKE HWY
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D
Name: SMITH, RICHARD
Address: 5735 W GULF TO LAKE HWY
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D
Name: WILLIAMS, JULIE
Address: 455 E KATIE ST
City-St-Zip: HERNANDO, FL 34442

Title: D
Name: GRIFFIN, CYNTHIA
Address: 5735 W GULF TO LAKE HWY
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D
Name: DIESING, ELAINE
Address: 5735 W GULF TO LAKE HWY
City-St-Zip: CRYSTAL RIVER, FL 34429

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: RICHARD A. SMITH

D

07/07/2010

Electronic Signature of Signing Officer or Director

Date