

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009021

FILED  
Jul 26, 2011  
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:**

DIESING, ELAINE M  
5735 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429 US

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

07/26/2011

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: 5735 W GULF TO LAKE HWY  
City-St-Zip: CRYSTAL RIVER, FL 34429

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 SMITH

D

07/26/2011

Electronic Signature of Signing Officer or Director

Date