## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009021

FILED Sep 07, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

5735 W GULF TO LAKE HWY 7092 COVEWOOD DRIVE CRYSTAL RIVER, FL 34429 SPRING HILL, FL 34609

Current Mailing Address: New Mailing Address:

P O BOX 513 7092 COVEWOOD DRIVE CRYSTAL RIVER, FL 34423 SPRING HILL, FL 34609

FEI Number: 20-0313013 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:

DIESING, ELAINE M
5735 W GULF TO LAKE HWY
CRYSTAL RIVER, FL 34429 US
SMITH, RICHARD A
7092 COVEWOOD DRIVE
SPRING HILL, FL 34609 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: RICHARD A SMITH 09/07/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: D

Name: SMITH, REBECCA
Address: 7092 COVEWOOD DRIVE
City-St-Zip: SPRING HILL, FL 34609

Title: D

Name: SMITH, RICHARD
Address: 7092 COVEWOOD DRIVE
City-St-Zip: SPRING HILL, FL 34609

Title:

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

Title:

Name: GRIFFIN, CYNTHIA
Address: 222 BALTIMORE BLVD
City-St-Zip: SEA GIRT, NJ 08750

Title: [

 Name:
 DIESING, ELAINE

 Address:
 5181 EL PASO TERRACE

 City-St-Zip:
 BEVERLY HILLS, FL 34465

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 09/07/2012