

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009786

FILED  
Apr 27, 2011  
Secretary of State

Entity Name: LIFE CARE FOUNDATION, INC.

## Current Principal Place of Business:

1515 SOUTH FEDERAL HIGHWAY  
SUITE 207  
BOCA RATON, FL 33432

## New Principal Place of Business:

401 WEST ATLANTIC AVE  
SUITE O-11  
DELRAY BEACH, FL 33334

## Current Mailing Address:

1515 SOUTH FEDERAL HIGHWAY  
SUITE 207  
BOCA RATON, FL 33432

## New Mailing Address:

333 CAMINO GARDENS BLVD  
BOCA RATON, FL 33432

FEI Number: 90-0125492

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DOGAN M. BENGISU, P.A.  
401 W. ATLANTIC AVE., SUITE O-11  
DELRAY BEACH, FL 33444 US

## Name and Address of New Registered Agent:

DOGAN M. BENGISU, P.A.  
401 W. ATLANTIC AVE.  
SUITE O-11  
DELRAY BEACH, FL 33444 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:

04/27/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: WESTPHAL, DAN DR  
Address: 5000 WEST OAKLAND PARK BLVD  
City-St-Zip: OAKLAND PARK, FL 33133

Title: D, P  
Name: BENGISU, DOGAN ESQ  
Address: 333 CAMINO GARDENS BLVD  
City-St-Zip: BOCA RATON, FL 33432

Title: D  
Name: NETSCHER, ROBIN  
Address: 101 EAST MCNAB ROAD  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D  
Name: SCHMIDT, JAMES L ESQ  
Address: UNIT #240, 981 HIGHWAY EAST  
City-St-Zip: DESTIN, FL 32541

Title: D  
Name: SPIRE-OH, KIMBERLEY ESQ.  
Address: 4440 PGA BOULEVARD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D  
Name: JACOBSEN, LIA  
Address: 3801 CONNECTICUT AVE NW  
City-St-Zip: WASHINGTON, DC 20008

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: DOGAN BENGISU

ATTY

04/27/2011

Electronic Signature of Signing Officer or Director

Date