2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2011
Secretary of State

DOCUMENT# N04000006539

Entity Name: CENTRAL CARE , INC.

Current Principal Place of Business:

137 MILEHAM DRIVE
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 580038
ORLANDO, FL 32858

New Mailing Address:

FEI Number: 14-1910968 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, LYNTON
137 MILEHAM DRIVE
ORLANDO, FL 32835 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: P
Name: ELAINE, MORRIS
Address: 137 MILEHAM DR
City-St-Zip: ORLANDO, FL 32835

Title: VP
Name: MORRIS, A L
Address: P.O. BOX 683345
City-St-Zip: ORLANDO, FL 32868

Title: S
Name: PHILLIPS, VERONICA
Address: P. O. BOX 580038
City-St-Zip: ORLANDO, FL 32858

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: ELAINE MORRIS DIR 04/25/2011

Electronic Signature of Signing Officer or Director Date