

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008914

FILED
Feb 20, 2007
Secretary of State

Entity Name: I CARE 'CAUSE I'M WORTH IT, INC.

Current Principal Place of Business:

841 BRAEMAR LANE
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 951479
LAKE MARY, FL 327951479

New Mailing Address:

841 BRAEMAR LANE
DELAND, FL 32724

FEI Number: 20-1619110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTIANO, JOSEPH
841 BRAEMAR LANE
DELAND, FL 32724 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 () Delete
Name: CHRISTIANO, JOSEPH A
Address: 841 BRAEMAR LANE
City-St-Zip: DELAND, FL 32724

Title: D () Delete
Name: CHRISTIANO, LORI A
Address: 841 BRAEMAR LANE
City-St-Zip: DELAND, FL 32724

Title: D () Delete
Name: C. DWIGHT BAIN,
Address: 1850 LEE ROAD #250
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: GEGERSON, STEVE
Address: 2582 S. MAGUIRE ROAD #342
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSEPH A CHRISTIANO

D

02/20/2007

Electronic Signature of Signing Officer or Director

Date