

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000318

FILED
Apr 30, 2009
Secretary of State

Entity Name: BECAUSE I CARE FOUNDATION, INC.

Current Principal Place of Business:

1720 A1A SOUTH, UNIT E
SAINT AUGUSTINE, FL 32080

New Principal Place of Business:

2160 TOCOI TERRACE
SAINT AUGUSTINE, FL 32092

Current Mailing Address:

1720 A1A SOUTH, UNIT E
SAINT AUGUSTINE, FL 32080

New Mailing Address:

2160 TOCOI TERRACE
SAINT AUGUSTINE, FL 32092

FEI Number: 20-2091638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOSPODARSKI, CAROL J
2160 TOCOI TERRACE
SAINT AUGUSTINE, FL 32092 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: GOSPODARSKI, WILLIAM T
Address: 2160 TOCOI TERRACE
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D () Delete
Name: GOSPODARSKI, CAROL J
Address: 2160 TOCOI TERRACE
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D () Delete
Name: YOUNG, GINETTE M
Address: 2130 TOCOI TERRACE
City-St-Zip: SAINT AUGUSTINE, FL 32092

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:

I hereby certify that the information supplied with this filing does not qualify 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: CAROL J GOSPODARSKI

DIR

04/30/2009

Electronic Signature of Signing Officer or Director

Date