

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006680

FILED
Feb 12, 2012
Secretary of State

Entity Name: BELIZE CARES! COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

701 BRICKELL AVENUE
1400
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

C/O STEVEN I. KALISKY
P.O.BOX 80-0346
MIAMI, FL 33280 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LAW CENTER OF THE AMERICAS, LLC.
201 SOUTH BISCAYNE BOULEVARD
SUITE 800
MIAMI, FL 33131 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: DPS
Name: KALISKY, STEVEN I
Address: 17961 BISCAYNE BLVD.
City-St-Zip: AVENTURA, FL 33160 US

Title: DT
Name: BUTLER, JEANNE A
Address: 312 S.E. 17TH STREET, 2ND FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33316 US

Title: D
Name: HALPERIN, RONNY J
Address: 312 S.E. 17TH STREET, 2ND FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33316 US

Title: D
Name: SCHLEIMER, BARRY D
Address: 17961 BISCAYNE BLVD.
City-St-Zip: AVENTURA, FL 33160

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: STEVEN I. KALISKY

DPS

02/12/2012

Electronic Signature of Signing Officer or Director

Date