2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003050

Entity Name: CARRABELLE CARES CORP.

FILED Apr 20, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

701 MARINE STREET CARRABELLE, FL 32322 US

Current Mailing Address: New Mailing Address:

POB 0666

CARRABELLE, FL 32322 US

FEI Number: 20-4775253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARRELL, JAMES F ROSIER, DANIEL 2522 HIGHWAY 98 WEST ROSIER, DANIEL 127 LARRY DRIVE

CARRABELLE, FL 32322 US CARRABELLE, FL 32322 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: DANIEL ROSIER 04/20/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: DIR

Name: ALLEN,, TAMARA B. Address: PO BOX 1089

City-St-Zip: CARRABELLE, FL 32322 US

Title: DIR

Name: COX, LESLEY H Address: PO DRAWER CC

City-St-Zip: CARRABELLE, FL 32322 US

Title: DIR

 Name:
 CARRELL, JAMES F

 Address:
 2522 HIGHWAY 98 WEST

 City-St-Zip:
 CARRABELLE, FL 32322 US

Title: DIR

Name: BUTZ, BARBARA A

Address: 4220 NATURAL BRIDGE ROAD City-St-Zip: TALLAHASSEE, FL 32308 US

Title: DIR

Name: ALLEN, STEVEN W Address: PO BOX 1089

City-St-Zip: CARRABELLE, FL 32322

Title: DIR

 Name:
 ROZIER, DANIEL

 Address:
 127 LARRY DRIVE

 City-St-Zip:
 CARRABELLE, FL
 32322

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: TAMARA B. ALLEN DIR 04/20/2012