

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006412

FILED
Feb 07, 2011
Secretary of State

Entity Name: CITRUS COUNTY BUILDERS ASSOCIATION BUILDERS CARE, INC.

Current Principal Place of Business:

1196 S LECANTO HWY
LECANTO, FL 34461

New Principal Place of Business:

Current Mailing Address:

1196 S LECANTO HWY
LECANTO, FL 34461

New Mailing Address:

FEI Number: 20-5178110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENEFIELD, ANDREW
1196 S LECANTO HWY
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

BIDLACK, DONNA
1196 S LECANTO HWY
LECANTO, FL 34461 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: DONNA BIDLACK

02/07/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: DAY-PERKINS, KATHLEEN
Address: 3527 N LECANTO HWY
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D
Name: RADFORD, RON
Address: PO BOX 1221
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: SD
Name: SWART, ERIC
Address: 406 NE 1ST STREET
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: PD
Name: GELFAND, RICHARD
Address: 610 SE US HIGHWAY 19
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D
Name: BARDSLEY, WAYNE
Address: 103 DAISY LANE
City-St-Zip: INVERNESS, FL 34452

Title: DVP
Name: GILBERT, MICHAEL
Address: 4222 W GULF TO LAKE HWY
City-St-Zip: LECANTO, FL 34461

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: RICHARD GELFAND

PD

02/07/2011

Electronic Signature of Signing Officer or Director

Date