2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 16, 2011
Secretary of State

DOCUMENT# N06000006412

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 (X)**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

BIDLACK, DONNA
2114 W SHINING DAWN LANE
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 10/16/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

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

Title: DT
Name: BIDLACK, DONNA
Address: 2114 W SHINING DAWN LANE
City-St-Zip: LECANTO, FL 34461

Title: VPD
Name: BENEFIELD, DREW
Address: 2017 W GULF TO LAKE HWY STE B
City-St-Zip: LECANTO, FL 34461

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

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

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: DONNA BIDLACK TD 10/16/2011
Electronic Signature of Signing Officer or Director Date