

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006903

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** PROJECT CARE UNLIMITED, INC.

**Current Principal Place of Business:**

1708 HUGHES DRIVE  
PLANT CITY, FL 33563

**New Principal Place of Business:**

**Current Mailing Address:**

1708 HUGHES DRIVE  
PLANT CITY, FL 33563

**New Mailing Address:**

**FEI Number:** 74-3181088

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SALTER, ELLA R  
1708 HUGHES DRIVE  
PLANT CITY, FL 33563 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:** P  
**Name:** SALTER, ELLA R  
**Address:** 1708 HUGHES DRIVE  
**City-St-Zip:** PLANT CITY, FL 33563

**Title:** VP  
**Name:** SALTER, REBEKAH  
**Address:** 1708 HUGHES DR  
**City-St-Zip:** PLANT CITY, FL 33563

**Title:** S  
**Name:** ALEXANDER, GLORIECE  
**Address:** 618 CHARLOW CT  
**City-St-Zip:** PLANT CITY, FL 33563

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:** ELLA SALTER

MRS.

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date