

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 05, 2012
Secretary of State

Entity Name: AVE MARIA CARE, INC.

Current Principal Place of Business:

661 GOLDEN GATE BLVD E
NAPELS, FL 34120

New Principal Place of Business:

Current Mailing Address:

2231 19TH STREET SW
NAPLES, FL 34117

New Mailing Address:

FEI Number: 83-0471516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, MARIA T
661 GOLDEN GATE BLVD E
NAPELS, FL 34120 US

Name and Address of New Registered Agent:

SANCHEZ-MCKAY, MARIA TERESITA D PRES.
661 GOLDEN GATE BLVD E
NAPELS, FL 34120 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: MARIA TERESITA D. SANCHEZ-MCKAY

01/05/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: SANCHEZ-MCKAY, MARIA TERESITA D
Address: 661 GOLDEN GATE BLVD E
City-St-Zip: NAPELS, FL 34120 US

Title: DS
Name: SANCHEZ, NOLAN D
Address: 661 GOLDEN GATE BLVD E
City-St-Zip: NAPELS, FL 34120 US

Title: T
Name: SANCHEZ, DANILO D
Address: 661 GOLDEN GATE BLVD E
City-St-Zip: NAPELS, FL 34120 US

Title: D
Name: SANCHEZ, NOEL D
Address: 661 GOLDEN GATE BLVD, E.
City-St-Zip: NAPLES, FL 34120 US

Title: DD
Name: SAN FELIPPO, MARIA D
Address: 661 GOLDEN GATE BLVD. E.
City-St-Zip: NAPLES, FL 34120 US

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: MARIA TERESITA D. SANCHEZ-MCKAY

PRES

01/05/2012

Electronic Signature of Signing Officer or Director

Date