

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003995

FILED
Feb 16, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA CARE, INC.

Current Principal Place of Business:

480 W CENTRAL PKWY
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

480 W CENTRAL PKWY
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 88-3760069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISSEN, ALISON C
480 W CENTRAL PKWY
ALTAMONTE SPRINGS, FL 32714 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 () Delete
Name: ISSEN, ALISON C
Address: 480 W CENTRAL PKWY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: T () Delete
Name: MALKENSON, GAIL
Address: 480 W CENTRAL PKWY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V () Delete
Name: GEANS, GEORGE
Address: 1414 KUHL AVE MP 93
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: GRAJALES, MARTHA
Address: 1560 ORANGE AVE, SUITE 450
City-St-Zip: WINTER PARK, FL 32789

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARTHA GRAJALES

T

02/16/2009

Electronic Signature of Signing Officer or Director

Date