## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000006531

Apr 30, 2010 Secretary of State

Entity Name: UNLIMITED CARE, INC.

Current Principal Place of Business: New Principal Place of Business:

389 KING ST

JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

389 KING ST

JACKSONVILLE, FL 32204

FEI Number: 26-0166220 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOHNSON, SHARYL 389 KING ST

JACKSONVILLE, FL 32204 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: F

Name: JOHNSON, SHARYL Address: 389 KING ST

City-St-Zip: JACKSONVILLE, FL 32204

Title: VP

Name: JENNINGS, STEVE Address: 389 KING ST

City-St-Zip: JACKSONVILLE, FL 32204

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: SHARYL JOHNSON P 04/30/2010