2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004873

FILED May 12, 2012 Secretary of State

Entity Name: INTERFAITH CARE GIVERS OF WEST VOLUSIA INC.

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

3155 PINE RUN TRAIL 105 W. WISCONSIN AV. DELAND, FL 32724

SUITE 206

DELAND, FL 32720

Current Mailing Address: New Mailing Address:

3155 PINE RUN TRAIL P. O. BOX 485

DELAND, FL 32724 DELAND, FL 32721 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

EVANS, DAVID MURPHY, SHELLY 3155 PINE RUN TRAIL 710 BREÉZY OAK CT. DELAND, FL 32724 US DELAND, FL 32724

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: SHELLY MURPHY 05/12/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

GARTSIDE, TANNA Name: Address: 141 W. WISCONSIN AVE. City-St-Zip: DELAND, FL 32720 US

Title:

PARSLOW, BARBARA D Name: Address: 4219 MARSH RD.. City-St-Zip: DELAND, FL 32724 US

Title:

WOODS, PETER T Name: Address: 869 LIBERTY CT. City-St-Zip: DELAND, FL 32724 US

Title:

Name: BERNARD, JAMES 2545 HIGHLAND PARK RD Address: City-St-Zip: DELAND, FL 32720 US

Title:

EIDT, JOHN C Name:

639 E. PENNSYLVANIA AVE. Address: DELAND, FL 32724 US City-St-Zip:

Title:

EVANS, DAVID Name: Address: 3155 PINE RUN TRAIL DELAND, FL 32724 US City-St-Zip:

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: BARBARA D. PARSLOW TD 05/12/2012