

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20260

FILED
Feb 11, 2009
Secretary of State

Entity Name: WE CARE-ORIOLE OF DELRAY, INC.

Current Principal Place of Business:

7099 W. ATLANTIC AVE
DELRAY BEACH, FL 33446 US

New Principal Place of Business:

Current Mailing Address:

6936 HUNTINGTON LANE
APT. 401
DELRAY BEACH, FL 33446 US

New Mailing Address:

FEI Number: 65-0118483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STENDIG, ISRAEL
6866 HUNINGTON LN #104
DELRAY BEACH, FL 33446 US

Name and Address of New Registered Agent:

STENDIG, ISRAEL
6866 HUNTINGTON LN #104
DELRAY BEACH, FL 33446 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: _____ Date: 02/11/2009
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: 1VP () Delete
Name: LEIKEN, SYLVIA
Address: 7076 HONTINGTON LN. #101
City-St-Zip: DELRAY BEACH, FL 33446

Title: P () Delete
Name: STENDIG, JUDITH E
Address: 6866 HUNTINGTON LANE, #104
City-St-Zip: DELRAY BCH, FL 33446

Title: T () Delete
Name: JEWLER, NATHAN
Address: 6936 HONTINGTON LN. #401
City-St-Zip: DELRAY BEACH, FL 33446

Title: RS () Delete
Name: HOFFMAN, IRVIN
Address: 7181 AMBERLY LANE
City-St-Zip: DELRAY BEACH, FL 33446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: 1VP (X) Change () Addition
Name: LEIKEN, SYLVIA
Address: 7076 HUNTINGTON LN. #101
City-St-Zip: DELRAY BEACH, FL 33446

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

Title: T (X) Change () Addition
Name: JEWLER, NATHAN
Address: 6936 HUNTINGTON LN. #401
City-St-Zip: DELRAY BEACH, FL 33446

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: NATHAN JEWLER T Date: 02/11/2009
Electronic Signature of Signing Officer or Director