

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42222

FILED
May 03, 2008
Secretary of State

Entity Name: WE CARE OF RAINBERRY BAY, INC.

Current Principal Place of Business:

2604 NW12TH STREET
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

2604 NW 12TH STREET
DELRAY BEACH, FL 33445 US

New Mailing Address:

FEI Number: 65-0237574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KOFF, NORMA
2604 NW 12TH STREET
DELRAY BEACH, FL 33445 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: V () Delete
Name: GOLDSTEIN, MILTON
Address: 2585 NW 13TH COURT
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: S () Delete
Name: OKIN, MILLIE
Address: 2941(A) NW10TH STREET
City-St-Zip: DELRAY BEACH, FL 33445 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: MARION, SMALL
Address: 2923 NW 10TH ST APT D
City-St-Zip: DELRAY BEACH, FL 33445 US

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: NORMA KOFF

PRES

05/03/2008

Electronic Signature of Signing Officer or Director

Date