2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 24, 2012
Secretary of State

DOCUMENT# N44009

Entity Name: COMMUNITY CARING CENTER OF BOYNTON BEACH, INC.

Current Principal Place of Business:

145 N.E. 4TH AVENUE
BOYNTON BEACH, FL 334350339

New Principal Place of Business:

145 N.E. 4TH AVENUE
BOYNTON BEACH, FL 334350339 US

Current Mailing Address:

145 N.E. 4TH AVENUE
BOYNTON BEACH, FL 334350339

New Mailing Address:

145 N.E. 4TH AVENUE
BOYNTON BEACH, FL 334350339 US

FEI Number: 65-0447796 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHERRY, JOHNSON
THE COMMUNITY CARING CENTER OF B.B. INC
145 N.E. 4TH AVE
BOYNTON BEACH, FL 33435 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: TD
Name: CONNOLLY, MAUREEN
Address: 145 NE 4TH AVE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP
Name: BAKER, EVERLENE
Address: 550 NW 9TH AVE
City-St-Zip: BOYNTON BEACH, FL 333435

Title: PRES
Name: PORTNOY, JOYCE C
Address: 145 NE 4TH AVE
City-St-Zip: BOYNTON BEACH, FL 33435 US

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: MAUREEN CONNOLLY TD 08/24/2012

Electronic Signature of Signing Officer or Director — Date