2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000520

Apr 05, 2012 Secretary of State

Entity Name: INTERFAITH CAREGIVERS OF SOUTH LEE, INC.

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

17592 ROCKEFELLER CIRCLE 17592 ROCKEFELLER CIR FT MYERS, FL 33967 FT MYERS, FL 33967

Current Mailing Address: New Mailing Address:

17592 ROCKEFELLER CIRCLE 17592 ROCKEFELLER CIR FT MYERS, FL 33967 FT MYERS, FL 33967

FEI Number: 65-0362473 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MARTIN, NANCY 7356 SANIBEL BLVD US FORT MYERS, FL 33967

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:

OGLETHORPE, JAMES Name: Address: 19232 LA SERENA DR City-St-Zip: FT MYERS, FL 33967

Title:

Name: ELLIS, TINA

Address: 12480 GATEWAY GREENS DR

City-St-Zip: FT MYERS, FL 33913

Title:

PINNEL, ROBERT Name: 19850 MARKWARD CIR Address: City-St-Zip: ESTERO, FL 33928

Title:

Name: OLSON, BONNIE

23187 MARSH LANDING BLVD Address:

City-St-Zip: ESTERO, FL 33928

Title:

ROEDEMA, KEMP Name: 12331 WATER OAK DR Address: ESTERO, FL 33928 City-St-Zip:

Title: Name:

LAU. GAIL

Address: 4700 PEMBROOKE LN BONITA SPRINGS, FL 34135 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: NANCY MARTIN ED 04/05/2012