2000 UNIFORM BUSINESS REPORT (UBK) DOCUMENT # N99000004559 FILED May 12, 2000 8:00 am Secretary of State 1. Entity Name CARTER CARE INC. 03-02-2000 90116 013 ****61.25 Mailing Address Principal Place of Business 2350 SCHALL CIRCLE 2350 SCHALL CIRCLE WEST PALM BEACH FL 33417 WEST PALM BEACH FL 33417-3002 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number Not Applicable \$8.75 Additional Zip Country Ζip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MARGIF CARTER Street Address (P.O. Box Number is Not Acceptable) 2350 SCHALL CIRCLE MOORECROFT, MARY 5050 PALM HILL DRIVE, #151 BEACH, WEST PALM BEACH FL 33415 8. 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. 01/19/00 SIGNATURE (NOTE: Registered Agent signature required when reinstating) d agent and title if applicable Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (66/6) η ☐ Change ☐ Addition TITLE TITLE MARY MOORECROFT 5050 PALM HILL DRIVE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 33417 <u>NEST PALM REACH.</u> Change Addition TITLE TITLE ☐ Delete MARGIE CARTER NAME NAME _ 2350 SCHALL CIRCLE STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL 33417 Crty-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete TITLE

MERRIS A. CARTER NAME NAME 5387 MENDOZA STREET STREET ADDRESS STREET ADDRESS CITY-ST-21P ST PALM BEACH, _FU 33415 CITY-ST-ZIP Addition Change TITLE ☐ Delete TITLE TERRELL A. CARTER NAME NAME 5387 MENDOZA STREET STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL. 33415 CRY-ST-7P CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE TIMOTHY A. CARTER NAMÉ NAME 2350 SCHALL CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33417 Addition Change ☐ Delete TITLE TITLE NAME T NATHAN MUNROE STREET ADDRESS STREET ADDRESS 1555 MARTIN LUTHER KING BLVD CITY-ST-ZIP #F-105 RIVIERA BEACH FL

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as regulired by Chapter 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE PROPERTY OF DIRECTOR

01/19/00

561<u>-965-7258</u>

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