

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000005893

FILED
Jan 27, 2012
Secretary of State

Entity Name: CUSTOMER CARE DOT COM, INC.

Current Principal Place of Business:

1392 SOUTH WOODLAND BOULEVARD
DELAND, FL 32720

New Principal Place of Business:

1642 N VOLUSIA AVE
SUITE 101
ORANGE CITY, FL 32763 US

Current Mailing Address:

1392 SOUTH WOODLAND BOULEVARD
DELAND, FL 32720

New Mailing Address:

1642 N VOLUSIA AVE
SUITE 101
ORANGE CITY, FL 32763 US

FEI Number: 59-3619303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINDERWEEDLE, HAINES, WARD & WOODMAN, P.A.
390 NORTH ORANGE AVENUE
1500 BANK OF AMERICA CENTER
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

FLINT, NANCY J
1642 N VOLUSIA AVE
SUITE 101
ORANGE CITY, FL 32763 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: NANCY J FLINT

01/27/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STANLEY, EDWIN J
Address: 1642 N VOLUSIA AVE, STE 101
City-St-Zip: ORANGE CITY, FL 32763 US

Title: VST
Name: KLEIN, JERRY M
Address: 1642 N VOLUSIA AVE, STE 101
City-St-Zip: ORANGE CITY, FL 32763 US

Title: CFO
Name: FLINT, NANCY J
Address: 1642 N VOLUSIA AVE, STE 101
City-St-Zip: ORANGE CITY, FL 32763 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NANCY J FLINT

CFO

01/27/2012

Electronic Signature of Signing Officer or Director

Date