

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000098156

Entity Name: FAMILY LIFE CARE, INC.

FILED
Jan 08, 2011
Secretary of State

Current Principal Place of Business:

712-B PINE AVENUE
GREEN COVE SPRINGS, FL 32043 US

New Principal Place of Business:

Current Mailing Address:

712-B PINE AVENUE
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

FEI Number: 59-3679263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCMULLEN, DAVID B
712-B PINE AVENUE
GREEN COVE SPRINGS, FL 32043 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: C
Name: MCMULLEN, DAVID
Address: 1703 SECLUDED WOODS WAY
City-St-Zip: ORANGE PARK, FL 32003

Title: S/T
Name: MCMULLEN, ROBIN
Address: 1703 SECLUDED WOODS WAY
City-St-Zip: ORANGE PARK, FL 32003

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: DAVID B MCMULLEN

CEO

01/08/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date