

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042302

FILED
Mar 01, 2007
Secretary of State

Entity Name: CARING, INCORPORATED OF BAY COUNTY

Current Principal Place of Business:

11921 CARUSO DRIVE
PANAMA CITY, FL 32404

New Principal Place of Business:

Current Mailing Address:

PO BOX 3567
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-3716024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, WALTER
11921 CARUSO DRIVE
PANAMA CITY, FL 32404 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBINSON, WALTER
Address: 11921 CARUSO DRIVE
City-St-Zip: PANAMA CITY, FL 32404

Title: D () Delete
Name: ROBINSON, MARY
Address: 11921 CARUSO DRIVE
City-St-Zip: PANAMA CITY, FL 32404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WALTER ROBINSON

PRES

03/01/2007

Electronic Signature of Signing Officer or Director

Date