2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2010
Secretary of State

DOCUMENT# P01000104771

Entity Name: CARE IN CHRIST, INC.

Current Principal Place of Business:

1665 DUNLAWTON
SUITE 104
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

1665 DUNLAWTON
SUITE 104
PORT ORANGE, FL 32127

New Mailing Address:

FEI Number: 59-3754103 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GAFFKA, BRUCE
1665 DUNLAWTON
SUITE 104
PORT ORANGE, FL 32127 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: PD
Name: GAFFKA, BRUCE
Address: 5763 STEWART AVENUE
City-St-Zip: PORT ORANGE, FL 32127

Title: S
Name: GAFFKA, ANN
Address: 5763 STEWART AVE
City-St-Zip: PORT ORANGE, FL 32127

Title: V
Name: FIELD, STEVE
Address: 1521 CASEY LN
City-St-Zip: PORT ORANGE, FL 32128

Title: V
Name: FIELD, CANDICE
Address: 1521 CASEY LN
City-St-Zip: PORT ORANGE, FL 32128

Title: V
Name: GAFFKA, CRAIG
Address: 860 SUGARHOUSE DR
City-St-Zip: PORT ORANGE, FL 32129

Title: V
Name: GAFFKA, ALLYSON
Address: 860 SUGARHOUSE DR
City-St-Zip: PORT ORANGE, FL 32129

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: BRUCE GAFFKA PD 01/06/2010

Electronic Signature of Signing Officer or Director — Date