

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006490

FILED  
Apr 14, 2012  
Secretary of State

**Entity Name:** RESPECTFUL CARE MANAGEMENT, INC.

**Current Principal Place of Business:**

11790 ST. ANDREWS PLACE  
UNIT 204  
WELLINGTON, FL 33414

**New Principal Place of Business:**

8225 SW 176TH TERRACE  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

11790 ST. ANDREWS PLACE  
UNIT 204  
WELLINGTON, FL 33414

**New Mailing Address:**

8225 SW 176TH TERRACE  
PALMETTO BAY, FL 33157

**FEI Number:** 03-0382200

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SESPANIAK, DONNA  
11790 ST. ANDREWS PLACE  
UNIT 204  
WELLINGTON, FL 33414 US

**Name and Address of New Registered Agent:**

SESPANIAK, DONNA  
8225 SW 176TH TERRACE  
PALMETTO BAY, FL 33157 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:

Electronic Signature of Registered Agent

04/14/2012

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: SESPANIAK, DONNA  
Address: 8225 SW 176TH TERRACE  
City-St-Zip: PALMETTO BAY, FL 33157

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: DONNA SESPANIAK

PRES

04/14/2012

Electronic Signature of Signing Officer or Director

Date