

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013631

FILED
Jan 12, 2011
Secretary of State

Entity Name: COMPASSIONATE MANAGEMENT CARE, INC.

Current Principal Place of Business:

626 LOGGERHEAD ISLAND DR
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

626 LOGGERHEAD ISLAND DR
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 02-0549163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEDENE, GWENDOLYN
626 LOGGERHEAD ISLAND DR
SATELLITE BEACH, FL 32937 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: D
Name: LEDENE, GWENDOLYN
Address: 626 LOGGERHEAD ISLAND DR
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D
Name: LEDENE, MARC
Address: 626 LOGGERHEAD ISLAND DR
City-St-Zip: SATELLITE BEACH, FL 32937

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: GWENDOLYN LEDENE

PRES

01/12/2011

Electronic Signature of Signing Officer or Director

Date