2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# P07000112892

Entity Name: FLORIDA BEST CARE, INC

Current Principal Place of Business:

695 ROB ROY DR
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

695 ROB ROY DR
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 39-2064641 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIMON, KARLA
2000 ATLANTIC SHORES BLVD
209
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

BENGHTT, ROSA S
695 ROB ROY DRIVE
CLERMONT, FL 34711 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: ROSA S. BENGHTT 04/25/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NAVAS, LEONEL W
Address: 695 ROB ROY DR
City-St-Zip: CLERMONT, FL 34711

Title: V (X) Delete
Name: BENGHTT, ROSA S
Address: 695 ROB ROY DR
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BENGHTT, ROSA S
Address: 695 ROB ROY DR
City-St-Zip: CLERMONT, FL 34711

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

I hereby certify that the information supplied with this filing does not qualify 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: ROSA S. BENGHTT P 04/25/2008
Electronic Signature of Signing Officer or Director Date