

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000011385

Entity Name: MAJOR CARE,INC

FILED
Apr 30, 2011
Secretary of State

Current Principal Place of Business:

5684 DOONESBURY WAY
TALLAHASSEE, FL 32303

New Principal Place of Business:

541 E TENNESSEE ST
TALLAHASSEE, FL 32316

Current Mailing Address:

5684 DOONESBURY WAY
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 26-0717626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, SHAWN
4496 LOST PINE DR
TALLAHASSEE, FL 32305 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: P
Name: COOPER, CARLISA S
Address: 5684 DOONESBURY WAY
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VP
Name: HARRIS, JAMES A JR
Address: 5684 DOONESBURY WAY
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VP
Name: JAMES, MICHAEL G
Address: 5684 DOONESBURY
City-St-Zip: TALLAHASSEE, FL 32303

Title: SEC.
Name: COOPER-ROYE, CARLEAH
Address: 5684 DOONESBURY WAY
City-St-Zip: TALLAHASSEE, FL 32303

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: JAMES HARRIS JR

VP

04/30/2011

Electronic Signature of Signing Officer or Director

Date