

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041543

Entity Name: CONCENTRIC CARE INC.

FILED
Jan 06, 2012
Secretary of State

Current Principal Place of Business:

10901 CORPORATE CIR., N., STE A
ST PETERSBURG, FL 33716

New Principal Place of Business:

Current Mailing Address:

10901 CORPORATE CIR., N., STE A
ST PETERSBURG, FL 33716

New Mailing Address:

FEI Number: 26-2472615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: DPVP
Name: SEXTON, TONI
Address: 10901 CORPORATE CIRCLE N STE A
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: ST
Name: SEXTON, TONI
Address: 10901 CORPORATE CIRCLE N STE A
City-St-Zip: SAINT PETERSBURG, FL 33716

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: TONI SEXTON

DPVP

01/06/2012

Electronic Signature of Signing Officer or Director

Date