

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000072702		
1. Entity Name GRAND CARE CORPORATION		
Principal Place of Business 7130 BENEVA RD SARASOTA, FL 34238 US		Mailing Address 7130 BENEVA RD SARASOTA, FL 34238 US
DO NOT WRITE IN THIS SPACE		
		 04282005 No Chg-P CR2E034 (10/03) 4. FEI Number 65-0443175 Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent STEPHEN F. VOIGT P.A. 2414 BEE RIDGE ROAD SARASOTA, FL 34239		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when retreating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	PVT	
NAME	DELGATO, VINCENT F	
STREET ADDRESS	7130 BENEVA RD	
CITY-ST-ZIP	SARASOTA, FL	
TITLE	S	
NAME	DELGATO, MARCUS	
STREET ADDRESS	7130 BENEVA RD	
CITY-ST-ZIP	SARASOTA, FL 34238	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Vincent F. Delgato, Pres.</i> 4/29/05 941 9270464 SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR Date Daytime Phone #		

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**DO NOT WRITE
IN THIS SPACE**