

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000091239

Entity Name: INFORMED CARE, INC.

FILED
Apr 22, 2008
Secretary of State

Current Principal Place of Business:

801 DOUGLAS AVENUE
SUITE 104
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

801 DOUGLAS AVENUE
SUITE 104
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3498294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEROUAC, MICHAEL
801 DOUGLAS AVE
SUITE 104
ALTAMONTE SPRINGS, FL 32714 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KEROUAC, MICHAEL
Address: 1000 MILLER LOOP
City-St-Zip: CHARLOTTESVILLE, VA 22903

Title: D () Delete
Name: TREMBLAY, GEORGE P
Address: 11542 HAPPY HOLLOW RD.
City-St-Zip: LOVELAND, CO 80538

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MICHAEL KEROUAC

SEC.

04/22/2008

Electronic Signature of Signing Officer or Director

Date