

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000054291

Entity Name: D.T.S. CARE, INC.

FILED
Jan 06, 2012
Secretary of State

Current Principal Place of Business:

2528--2 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

P O BOX 14924
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3517101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRELL, DEBORAH D
2528--2 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308 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: CEO
Name: HARRELL, DEBORAH D
Address: 2528--2 BARRINGTON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: TRES
Name: HARRELL, RICHARD L
Address: 2528--2 BARRINGTON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: PRES
Name: HARRELL, TODD D
Address: 2528--2 BARRINGTON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP
Name: HARRELL, SCOTT M
Address: 2528--2 BARRINGTON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

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: TODD HARRELL

PRES

01/06/2012

Electronic Signature of Signing Officer or Director

Date