

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000058075

Entity Name: B C HEALTHCARE, INC.

FILED  
Feb 01, 2012  
Secretary of State

## Current Principal Place of Business:

551 REDSTONE AVE W  
CRESTVIEW, FL 32536

## New Principal Place of Business:

## Current Mailing Address:

551 REDSTONE AVE W  
CRESTVIEW, FL 32536

## New Mailing Address:

FEI Number: 59-3521717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, LAWTON B  
8172 GREEN ST  
LAUREL HILL, FL 32567 US

## Name and Address of New Registered Agent:

THIGPEN, CATHERINE S  
1005 CAPRI COURT  
CRESTVIEW, FL 32539 US

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: CATHERINE S. THIGPEN

02/01/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: THIGPEN, CATHERINE  
Address: 1005 CAPRI COURT  
City-St-Zip: CRESTVIEW, FL 32539

Title: D  
Name: THIGPEN, LEE R  
Address: 1005 CAPRI COURT  
City-St-Zip: CRESTVIEW, FL 32539

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: CATHERINE S THIGPEN

D

02/01/2012

Electronic Signature of Signing Officer or Director

Date