

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000097607

FILED
Jan 31, 2011
Secretary of State

Entity Name: COMMUNICARE THERAPIES, INC.

Current Principal Place of Business:

11101 NW 12TH PLACE
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

12921 SW 1ST RD SUITE 107
BOX 217
JONESTOWN, FL 32669

New Mailing Address:

PO BOX 357603
GAINESVILLE, FL 32635

FEI Number: 59-3543588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDSON, LINDA F
11101 NW 12TH PLACE
GAINESVILLE, FL 32606 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: P
Name: DAVIDSON, LINDA F
Address: 11101 NW 12TH PLACE
City-St-Zip: GAINESVILLE, FL 32606 US

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: LINDA F DAVIDSON

P

01/31/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date