2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2021
Secretary of State
2043693003CC

DOCUMENT# 755977

Entity Name: VERSACARE, INC.

Current Principal Place of Business:

4097 TRAIL CREEK ROAD
SUITE B
RIVERSIDE, CA 92505

Current Mailing Address:

4097 TRAIL CREEK ROAD
SUITE B
RIVERSIDE, CA 92505 US

FEI Number: 33-0052434

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIR, DIRECTOR
Name	SANDEFUR, CHARLES C
Address	4097 TRAIL CREEK ROAD, SUITE B
City-State-Zip:	RIVERSIDE CA 92505

Title	PRESIDENT, SECRETARY, DIRECTOR
Name	MACOMBER, THOMAS K
Address	4097 TRAIL CREEK RD., SUITE B
City-State-Zip:	RIVERSIDE CA 92505

Title	DIRECTOR
Name	BRILL, DEBRA
Address	4097 TRAIL CREEK ROAD SUITE B
City-State-Zip:	RIVERSIDE CA 92505

Title	DIRECTOR
Name	PAULSON, LISA BISSELL
Address	4097 TRAIL CREEK ROAD, SUITE B
City-State-Zip:	RIVERSIDE CA 92505

Title	TREASURER, DIRECTOR
Name	BRODERSEN, ELLEN H
Address	4097 TRAIL CREEK ROAD, SUITE B
City-State-Zip:	RIVERSIDE CA 92505

Title	DIRECTOR
Name	COSTA, MYRNA
Address	4097 TRAIL CREEK ROAD SUITE B
City-State-Zip:	RIVERSIDE CA 92505

Title	DIRECTOR
Name	PERSHING, RICHARD W
Address	4097 TRAIL CREEK ROAD SUITE B
City-State-Zip:	RIVERSIDE CA 92505

Title	DIRECTOR
Name	FORBES, BRAD
Address	4097 TRAIL CREEK ROAD, SUITE B
City-State-Zip:	RIVERSIDE CA 92505

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS K MACOMBER PRESIDENT 01/29/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LESLIE, MARISSA
Address	4097 TRAIL CREEK ROAD. SUITE B
City-State-Zip:	RIVERSIDE CA 92505

Title	DIRECTOR
Name	HOY, DARRIEL
Address	4097 TRAIL CREEK ROAD SUITE B
City-State-Zip:	RIVERSIDE CA 92505