

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755977

Entity Name: VERSACARE, INC.**Current Principal Place of Business:**25745 BARTON ROAD
STE 515
LOMA LINDA, CA 92354**Current Mailing Address:**25745 BARTON ROAD
STE 515
LOMA LINDA, CA 92354 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	Title	TREASURER, DIRECTOR
Name	SANDEFUR, CHARLES C	Name	BRODERSEN, ELLEN H
Address	25745 BARTON ROAD STE 515	Address	25745 BARTON ROAD STE 515
City-State-Zip:	LOMA LINDA CA 92354	City-State-Zip:	LOMA LINDA CA 92354
Title	PRESIDENT, SECRETARY, DIRECTOR	Title	DIRECTOR
Name	MACOMBER, THOMAS K	Name	COSTA, MYRNA
Address	25745 BARTON ROAD STE 515	Address	25745 BARTON ROAD STE 515
City-State-Zip:	LOMA LINDA CA 92354	City-State-Zip:	LOMA LINDA CA 92354
Title	DIRECTOR	Title	DIRECTOR
Name	BRILL, DEBRA	Name	PERSHING, RICHARD W
Address	25745 BARTON ROAD STE 515	Address	25745 BARTON ROAD STE 515
City-State-Zip:	LOMA LINDA CA 92354	City-State-Zip:	LOMA LINDA CA 92354
Title	DIRECTOR	Title	DIRECTOR
Name	PAULSON, LISA BISSELL	Name	FORBES, BRAD
Address	25745 BARTON ROAD STE 515	Address	25745 BARTON ROAD STE 515
City-State-Zip:	LOMA LINDA CA 92354	City-State-Zip:	LOMA LINDA CA 92354

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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 MACOMBER**PRESIDENT****02/15/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LESLIE, MARISSA
Address 25745 BARTON ROAD
STE 515
City-State-Zip: LOMA LINDA CA 92354

Title DIRECTOR
Name STAUFFER, KARI
Address 25745 BARTON ROAD
STE 515
City-State-Zip: LOMA LINDA CA 92354

Title DIRECTOR
Name HOY, DARRIEL
Address 25745 BARTON ROAD
STE 515
City-State-Zip: LOMA LINDA CA 92354