2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2025
Secretary of State
2544216333CC

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	PERSHING, RICHARD W	Name	PAULSON, LISA BISSELL
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	FORBES, BRAD	Name	LESLIE, MARISSA
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 04/15/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	HOY, DARRIEL
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