

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003332

Entity Name: FLORIDA CARE PROPERTIES, INC.**Current Principal Place of Business:**5243 LITTLE DEBBIE PARKWAY
SUITE 101
OOLTEWAH, TN 37363**Current Mailing Address:**5243 LITTLE DEBBIE PARKWAY
SUITE 101
OOLTEWAH, TN 37363 US**FEI Number:** 58-2550002**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARRETT, MARVIN
C/O FLORIDA CARE PROPERTIES, INC.
1811 ENGLEWOOD ROAD PMB 353
ENGLEWOOD, FL 34223 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:** MARVIN GARRETT

03/07/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DCEO
Name WALDROP, MARK A.
Address 5243 LITTLE DEBBIE PARKWAY
SUITE 101
City-State-Zip: OOLTEWAH TN 37363-4515

Title DIRECTOR
Name DUGGAN, TIMOTHY A.
Address 5243 LITTLE DEBBIE PARKWAY
SUITE 101
City-State-Zip: OOLTEWAH TN 37363-4515

Title DPRES
Name GARRETT, MARVIN E
Address 10984 TREVINO STREET
City-State-Zip: ENGLEWOOD FL 34223-6700

Title VP
Name ROWE, WILLIAM F.
Address 5243 LITTLE DEBBIE PARKWAY
SUITE 101
City-State-Zip: OOLTEWAH TN 37363-4515

Title VP
Name WAGNER, TODD D
Address 5243 LITTLE DEBBIE PARKWAY
SUITE 101
City-State-Zip: OOLTEWAH TN 37363

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: TODD D. WAGNER

VICE PRESIDENT

03/07/2023

Electronic Signature of Signing Officer/Director Detail

Date