2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2013
Secretary of State
CC9862338379

DOCUMENT# N02000002215

Entity Name: BIG BEND COMMUNITY BASED CARE, INC.

Current Principal Place of Business:

525 N MLK JR BLVD
TALLAHASSEE, FL 32301

Current Mailing Address:

525 N MLK JR BLVD
TALLAHASSEE, FL 32301

FEI Number: 03-0423156

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATKINS, MIKE
525 N MLK JR BLVD
TALLAHASSEE, FL 32301 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	P
Name	JOHNS, REGGIE
Address	11828 FRONT BEACH ROAD
City-State-Zip:	PANAMA CITY BEACH FL 32407

Title	D
Name	PIC, JEFFREY
Address	3701 CORNELIA LANE
City-State-Zip:	PANAMA CITY FL 32405

Title	VP
Name	NELSON, LINDA
Address	3202 WEST LAKESHORE DRIVE
City-State-Zip:	TALLAHASSEE FL 32312

Title	DIRECTOR
Name	HOLIFIELD, LIZ
Address	4032 LONGLEAF RD.
City-State-Zip:	TALLAHASSEE FL 32310

Title	S
Name	MILTON, KATHY
Address	4128 B LAFAYETTE STREET
City-State-Zip:	MARIANNA FL 32446

Title	T
Name	PAULINE, PATRICK
Address	4263 MILLWOOD LN
City-State-Zip:	TALLAHASSEE FL 32312

Title	D
Name	HARCUS, CATHY
Address	525 EAST FIFTEENTH STREET
City-State-Zip:	PANAMA CITY FL 32405

Title	DIRECTOR
Name	HAMILTON, HARRY
Address	3252 TRIPLE LANE
City-State-Zip:	BONIFAY FL 32425

Continues on page 2

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: REGGIE JOHNS PRESIDENT 03/26/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CONDRY, EVERETT
Address	1313 NANCY DR.
City-State-Zip:	TALLAHASSEE FL 32301

Title	DIRECTOR
Name	SMITH, BAMBI
Address	156 GILCREASE LANE
City-State-Zip:	QUINCY FL 32351