

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004725

Entity Name: THE CASCADES WE CARE, INC.**Current Principal Place of Business:**7405 HAVILAND CIRCLE
BOYNTON BEACH, FL 33437**Current Mailing Address:**7405 HAVILAND CIRCLE
BOYNTON BEACH, FL 33437**FEI Number: 01-0930951****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**FEIT, IRWIN J
7405 HAVILAND CIRCLE
BOYNTON BEACH, FL 33437 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	PRESIDENT
Name	SCHWAMB, SHARI
Address	6764 CHIMERE TERRACE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	DIRECTOR
Name	WEISGRAU, BERNICE
Address	11564 ALANA TERRACE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	TREASURER
Name	ERNEST, BERGMAN
Address	6673 SHERBROOK DRIVE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	VP
Name	FEIT, IRWIN J
Address	7405 HAVILAND CIRCLE
City-State-Zip:	BOYNTON BEACH FL 33437

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: ERNEST BERGMAN**TREASURER****02/02/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date