

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010165

Entity Name: NCARES, INC.**Current Principal Place of Business:**85332 MINER RD
YULE, FL 32097**Current Mailing Address:**85332 MINER RD
YULE, FL 32097 US**FEI Number:** 45-3797722**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MATHEWS, EDWARD E
85332 MINER RD
YULE, FL 32097 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 DIRECTOR
Name ANDERSON, FERDERIC SII
Address 95018 PALM POINTE DR. N
City-State-Zip: FERNANDINA BEACH FL 32034

Title DIRECTOR
Name MORRIS, DWAYNE E
Address 28200 TRACY ROAD
City-State-Zip: HILLIARD FL 32046

Title DIRECTOR
Name TICE, THOMAS E
Address 95071 WHISTLING DUCK CIR
City-State-Zip: FERNANDINA BEACH FL 32034

Title TREASURER, DIRECTOR
Name FOSS, GEORGE EIII
Address 96125 MARSH LAKES DR
City-State-Zip: FERNANDINA BEACH FL 32034

Title PRESIDENT, DIRECTOR
Name SINOR, BUDDY R
Address 96282 OYSTER BAY DRIVE
City-State-Zip: FERNANDINA BEACH FL 32034

Title ASST. TREASURER, DIRECTOR
Name BRUMUND, WILLIAM F
Address 96253 BAY VIEW DR
City-State-Zip: FERNANDINA BEACH FL 32034

Title DIRECTOR
Name GRIFFIN, MICHAEL S
Address PO BOX 15190
City-State-Zip: FERNANDINA BEACH FL 32034

Title DIRECTOR
Name BROOKE, JAMES
Address 7 HICKORY LANE
City-State-Zip: FERNANDINA BEACH FL 32034

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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: EDWARD E MATHEWS**SECRETARY, DIRECTOR 01/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	SECRETARY, DIRECTOR
Name	MATHEWS, EDWARD E
Address	85332 MINER RD
City-State-Zip:	YULE FL 32097