

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000009546

Entity Name: PORTS OF CARE INC

Current Principal Place of Business:

1500 N. FOREST AVE
ORLANDO, FL 32803

Current Mailing Address:

16400 COLLINS AVE
APT 542
SUNNY ISLES BEACH, FL 33106

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILTSEY, JOHN A
16400 COLLINS AVE
APT 542
SUNNY ISLES BEACH, FL 33160 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 CEO
Name WILTSEY, JOHN A
Address 16400 COLLINS AVE APT 542
City-State-Zip: SUNNY ISLES BEACH FL 33106

Title VP
Name WILTSEY, JOHN D
Address 1500 N. FOREST AVE
City-State-Zip: ORLANDO FL 32803

Title VP
Name WILTSEY, CONNIE M
Address 1500 N. FOREST AVE
City-State-Zip: ORLANDO FL 32803

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: JOHN A WILTSEY

CEO

06/27/2018

Electronic Signature of Signing Officer/Director Detail

Date