2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2016
Secretary of State
CC5494022239

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Entity Name: CARE 4 AMERICA INC.

Current Principal Place of Business:

20494 NW 27 ST
MORRISTON, FL 32668

Current Mailing Address:

PO BOX 3373
DUNNELLON, FL 34430

FEI Number: 65-0955434

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARROLL, JUANA
20494 NW 27 ST
MORRISTON, FL 32668 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	PD
Name	CARROLL, JUANA
Address	20494 NW 27 ST
City-State-Zip:	MORRISTON FL 32668

Title	TREASURER
Name	PUIG IRIBAR, GREIDY
Address	3500 WINDMEADOWS BLVD APT 36
City-State-Zip:	GAINESVILLE FL 32608

Title	SECRETARY
Name	HALL, NANCY
Address	7150 SE 181 CT
City-State-Zip:	MORRISTON FL 32668

Title	VPD
Name	CARROLL, TOM
Address	20494 NW 27 ST
City-State-Zip:	MORRISTON FL 32668

Title	DIRECTOR
Name	O'BRIEN, KATHLEEN
Address	8702 SW 122 ST
City-State-Zip:	GAINESVILLE FL 32608

Title	DIRECTOR
Name	DIMURO, EMANUEL DANIEL
Address	20494 NW 27 ST
City-State-Zip:	MORRISTON FL 32668

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: JUANA CARROLL PRESIDENT 04/30/2016

Electronic Signature of Signing Officer/Director Detail — Date