2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 16, 2013
Secretary of State
CC6505592680

DOCUMENT# N99000004301

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: Yes

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

Title	D
Name	ROBINSON, MITZI
Address	3225 SW 181 CT
City-State-Zip:	DUNNELLON FL 34432

Title	D
Name	CONLEY, CHERYNP
Address	20733 CHESTNUT ST
City-State-Zip:	DUNNELLON FL 34431

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

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

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 06/16/2013

Electronic Signature of Signing Officer/Director Detail — Date