

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000011385

Entity Name: MAJOR CARE,INC

Current Principal Place of Business:

5684 DOONESBURY WAY
TALLAHASSEE, FL 32303

Current Mailing Address:

5684 DOONESBURY WAY
TALLAHASSEE, FL 32303

FEI Number: 26-0717626

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIFFIN, SHAWN
4496 LOST PINE DR
TALLAHASSEE, FL 32305 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 P
Name COOPER, CARLISA S
Address 5684 DOONESBURY WAY
City-State-Zip: TALLAHASSEE FL 32303

Title VP
Name HARRIS, JAMES AJR
Address 5684 DOONESBURY WAY
City-State-Zip: TALLAHASSEE FL 32303

Title VP
Name JAMES, MICHAEL G
Address 5684 DOONESBURY
City-State-Zip: TALLAHASSEE FL 32303

Title SEC.
Name COOPER-ROYE, CARLEAH
Address 5684 DOONESBURY WAY
City-State-Zip: TALLAHASSEE FL 32303

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CARLISA COOPER

PRESIDENT

04/18/2013

Electronic Signature of Signing Officer/Director Detail

Date