

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000053117

Entity Name: CARE PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

10871 49TH STREET N
CLEARWATER, FL 33762

Current Mailing Address:

P. O. BOX 2791
PINELLAS PARK, FL 33780 US

FEI Number: 36-4840666

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HEGWOOD, RANDY B
10871 49TH STREET N.
CLEARWATER, FL 33762 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 HEGWOOD, RANDY B
Address 10871 49TH STREET N.
City-State-Zip: PINELLAS PARK FL 33762

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: RANDY B. HEGWOOD

PRESIDENT

04/26/2018

Electronic Signature of Signing Officer/Director Detail

Date