

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90037 025 ***150.00

DOCUMENT # F05000006836	
1. Entity Name HUMANICARE INTERNATIONAL, INC.	

Principal Place of Business 9 ELKINS ROAD EAST BRUNSWICK NJ 08816	Mailing Address 9 ELKINS ROAD EAST BRUNSWICK NJ 08816
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/06)

4. FEI Number 22-2861616	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

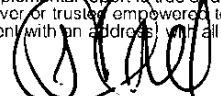
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	C GEGELYS, ANTHONY A 9 ELKINS ROAD EAST BRUNSWICK NJ 08816 ☐ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	DP GEGELYS, CHRIS 9 ELKINS ROAD EAST BRUNSWICK NJ 08816 ☒ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	VP SIVILICH, DANIEL M 9 ELKINS ROAD EAST BRUNSWICK NJ 08816 ☒ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	S AUSTIN, ELAINE 9 ELKINS ROAD EAST BRUNSWICK NJ 08816 ☒ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	T DUGAS, JAMES 9 ELKINS ROAD EAST BRUNSWICK NJ 08816 ☒ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	PRESIDENT JAMES BETTER 4265 W VERNAL PIKE BLOOMINGTON, IN 47404 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	SECRETARY STEPHEN FECHALOS 4265 W. VERNAL PIKE BLOOMINGTON, IN 47404 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VP ADMINISTRATION JOYCE WICK 4265 W. VERNAL PIKE BLOOMINGTON, IN 47404 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VP OPERATIONS STEVEN BUSSE 4265 W. VERNAL PIKE BLOOMINGTON, IN 47404 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, and all other like empowered.

SIGNATURE:		Stephen M. Fechalos, Secretary 2/22/07 82-332-3703
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		