

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002820

**Entity Name:** I.C.A.N., INC.

**Current Principal Place of Business:**

135 DILL ST  
MADISON, FL 32340

**Current Mailing Address:**

P O BOX 302  
MADISON, FL 32340

**FEI Number:** 06-1688062

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FLOWERS, RETIS  
889 SE CALL DRIVE  
LEE, FL 32059 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 M  
Name QUACKENBUSH, RICH  
Address 286 NW SETTLEMENT ROAD  
City-State-Zip: MADISON FL 32340

Title P  
Name TOOKES, OCTAVIOUS  
Address 708 SMITH  
City-State-Zip: MADISON FL 32059

Title D  
Name GASTON, LINDA P  
Address 135 NE DILL ST.  
City-State-Zip: MADISON FL 32059

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: RICHARD QUACKENBUSH**

**MEMBER AT LARGE**

**02/06/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date