

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002820

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

Current Principal Place of Business:

889 SE CALL DRIVE
LEE, FL 32059

Current Mailing Address:

P O BOX 302
MADISON, FL 32341 US

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 PRESIDENT
Name TOOKES, OCTAVIOUS
Address 708 SMITH
City-State-Zip: MADISON FL 32340

Title BENEVOLENCE DIRECTOR
Name GASTON, LINDA
Address 818 NW HAMBURG RD
City-State-Zip: MADISON FL 32340

Title SECRETARY
Name BROWN, DEBORAH
Address 135 NE DILL ST
City-State-Zip: MADISON FL 32340

Title TREASURER
Name FLOWERS, RETIS
Address 889 SE CALL DRIVE
City-State-Zip: LEE 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: LINDA GASTON

**BENEVOLENCE
DIRECTOR**

02/15/2014

Electronic Signature of Signing Officer/Director Detail

Date