

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000000373

**FILED  
Jan 17, 2024  
Secretary of State  
2066052211CC**

**Entity Name:** I.CARE CORPORATION

**Current Principal Place of Business:**

79851 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036

**Current Mailing Address:**

79851 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036 US

**FEI Number:** 86-1391515

**Certificate of Status Desired:** No

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

GOLDBERG, MICHAEL I  
79851 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036 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 GOLDBERG, MICHAEL I  
Address 79851 OVERSEAS HIGHWAY  
City-State-Zip: ISLAMORADA FL 33036

Title VP  
Name SMITH, KYLIE M  
Address 79851 OVERSEAS HIGHWAY  
City-State-Zip: ISLAMORADA FL 33036

Title T  
Name LAUGHLIN, SHELLY  
Address 79851 OVERSEAS HIGHWAY  
City-State-Zip: ISLAMORADA FL 33036

*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:** MICHAEL GOLDBERG

**PRESIDENT**

**01/17/2024**

Electronic Signature of Signing Officer/Director Detail

Date