

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23000000493

Entity Name: GCM CARES FOR YOU, INC.

Current Principal Place of Business:

2246 NW 40TH TERRACE, SUITE B
GAINESVILLE, FL 32605

Current Mailing Address:

2246 NW 40TH TERRACE, SUITE B
GAINESVILLE, FL 32605

FEI Number: 92-2262860

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAVAGNINO, EDWARD A
4001 NEWBERRY ROAD, SUITE E-IV
GAINESVILLE, FL 32607 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: EDWARD A. LAVAGNINO

04/14/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PVST
Name LAVAGNINO, EDWARD
Address 10000 SW 52ND AVE J55
City-State-Zip: GAINESVILLE FL 32608

Title D
Name LAVAGNINO, EDWARD
Address 10000 SW 52ND AVE J55
City-State-Zip: GAINESVILLE FL 32608

Title D
Name TERRY, TIMMIE
Address 490 TURKEY CRK
City-State-Zip: ALACHUA FL 32615

Title D
Name PERSAD, RANDY
Address 963 NW 122ND TER
City-State-Zip: NEWBERRY FL 32669

Title D
Name MORRISON, SHAWN
Address 2173 SW CENTERVILLE AVE
City-State-Zip: FORT WHITE FL 32038

Title D
Name LAVAGNINO, BEATRIZ
Address 4529 E 6TH AVE
City-State-Zip: ANKORAGE AK 99508

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: EDWARD LAVAGNINO

PRESIDENT

04/14/2024

Electronic Signature of Signing Officer/Director Detail

Date