

1.) CORPORATION NAME: American Family Care, Inc.	DUE DATE: 4/30/2013
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CTR 16TH FLR 1111 E MAIN ST	SCC ID NO: F1891698
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND, VA	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: CA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 200 OCEANGATE SUITE 100 CITY/ST/ZIP: LONG BEACH, CA 90802	
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7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: GLORIA CALDERON TITLE: PRESIDENT ADDRESS: 200 OCEANGATE SUITE 100 CITY/ST/ZIP/CO: LONG BEACH, CA 90802	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: JOSEPH W. WHITE TITLE: CFO ADDRESS: 200 OCEANGATE SUITE 100 CITY/ST/ZIP/CO: LONG BEACH, CA 90802	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: JEFF D BARLOW TITLE: SECRETARY ADDRESS: 300 UNIVERSITY AVE SUITE 100 CITY/ST/ZIP/CO: SACRAMENTO, CA 95825	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: JOANN ZARZA-GARRIDO TITLE: DIRECTOR ADDRESS: 200 OCEANGATE SUITE 100 CITY/ST/ZIP/CO: LONG BEACH, CA 90802	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JEFF D BARLOW	JEFF D BARLOW, SECRETARY	4/22/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.