

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 06, 2010
Secretary of State

DOCUMENT# F09000003213

Entity Name: PIONEER LIFE CARE, INC.

Current Principal Place of Business:

16120 N NEBRASKA AVE
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

16120 N NEBRASKA AVE
LUTZ, FL 33549

New Mailing Address:

FEI Number: 27-0047867 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BADENHORST, LOUIS D
16120 N NEBRASKA AVE
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CPD
Name: BADENHORST, LOUIS
Address: 16120 N NEBRASKA AVE
City-St-Zip: LUTZ, FL 33549

Title: SD
Name: CRAIG, DEBBIE
Address: 110 LONG SHADOW LANE
City-St-Zip: CARY, NC 27518

Title: DR
Name: VAN ZYL, LEONEL DR
Address: 1230 TWIN BRANCHES WAY STE 104
City-St-Zip: RALEIGH, NC 27608

Title: DR
Name: RANK, MARIJO DR
Address: 287 PASADENA
City-St-Zip: LEXINGTON, KY 40503

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: LOUIS D BADENHORST

CPD

09/06/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date