

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Sep 16, 2010
Secretary of State**

DOCUMENT# P00000105709

Entity Name: EXTREME CARE PLUS, INC.

Current Principal Place of Business:

12013 BAILEY RD
KATHLEEN, FL 338499576 US

New Principal Place of Business:

823 NORTH SWINDELL AVENUE
LAKELAND, FL 338151117 US

Current Mailing Address:

12013 BAILEY RD
KATHLEEN, FL 338499576 US

New Mailing Address:

823 NORTH SWINDELL AVENUE
LAKELAND, FL 338151117 US

FEI Number: 59-3682088 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, JOSEPH C P D
12013 BAILEY RD
KATHLEEN, FL 338499576 US

Name and Address of New Registered Agent:

DEESE, ROSIE R
823 NORTH SWINDELL AVENUE
LAKELAND, FL 338151117 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: ROSIE R DEESE 09/16/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P D
Name: DEESE, ROSIE R
Address: 823 NORTH SWINDELL AVENUE
City-St-Zip: LAKELAND, FL 338151117 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROSIE R DEESE P D 09/16/2010

Electronic Signature of Signing Officer or Director Date