

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144675

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: LIGHTHOUSE HOME HEALTH CARE, INC.

**Current Principal Place of Business:**

1805 SOUTH 25TH STREET  
SUITE 1  
FORT PIERCE, FL 34947

**New Principal Place of Business:**

**Current Mailing Address:**

1805 SOUTH 25TH STREET  
SUITE 1  
FORT PIERCE, FL 34947

**New Mailing Address:**

FEI Number: 55-0863543      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FASSOLD, CHRYSTAL B  
1805 SOUTH 25TH STREET  
SUITE 1  
FORT PIERCE, FL 34947 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: FASSOLD, CHRYSTAL  
Address: 1805 SOUTH 25TH STREET, SUITE 1  
City-St-Zip: FORT PIERCE, FL 34947

Title: VP ( ) Delete  
Name: FASSOLD, SCOT K SR  
Address: 1805 SOUTH 25TH STREET, SUITE 1  
City-St-Zip: FORT PIERCE, FL 34947

Title: SEC ( ) Delete  
Name: MORALES, BETHANY  
Address: 1805 SOUTH 25TH STREET, SUITE 1  
City-St-Zip: FORT PIERCE, FL 34947

Title: TRES ( ) Delete  
Name: FASSOLD, CHRYSTAL  
Address: 1805 SOUTH 25TH STREET, SUITE 1  
City-St-Zip: FORT PIERCE, FL 34947

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: FASSOLD, CHRYSTAL BAKER  
Address: 1805 SOUTH 25TH STREET, SUITE 1  
City-St-Zip: FORT PIERCE, FL 34947

Title: VP (X) Change ( ) Addition  
Name: MORALES, BETHANY A  
Address: 1805 SOUTH 25TH STREET, SUITE 1  
City-St-Zip: FORT PIERCE, FL 34947

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TRES (X) Change ( ) Addition  
Name: FASSOLD, CHRYSTAL BAKER  
Address: 1805 SOUTH 25TH STREET, SUITE 1  
City-St-Zip: FORT PIERCE, FL 34947

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHRYSTAL BAKER FASSOLD

OWNE

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date