

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144675

FILED
Apr 28, 2010
Secretary of State

Entity Name: LIGHTHOUSE HOME HEALTH CARE, INC.

Current Principal Place of Business:

800 VIRGINIA AVENUE
S55
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

800 VIRGINIA AVENUE
S55
FORT PIERCE, FL 34982

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:

BAKER, CHRYSTAL L
800 VIRGINIA AVENUE
S55
FORT PIERCE, FL 34982 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
Name: BAKER, CHRYSTAL L
Address: 800 VIRGINIA AVENUE, S55
City-St-Zip: FORT PIERCE, FL 34982

Title: VP
Name: MORALES, BETHANY A
Address: 800 VIRGINIA AVENUE S55
City-St-Zip: FORT PIERCE, FL 34982

Title: SEC
Name: MORALES, BETHANY
Address: 800 VIRGINIA AVENUE, S55
City-St-Zip: FORT PIERCE, FL 34982

Title: TRES
Name: BAKER, CHRYSTAL L
Address: 800 VIRGINIA AVENUE S55
City-St-Zip: FORT PIERCE, FL 34982

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: CHRYSTAL BAKER

OWNE

04/28/2010

Electronic Signature of Signing Officer or Director

Date