2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

DOCUMENT# P10000104046

Entity Name: OAK LEAF HOME HEALTH AGENCY, INC

Current Principal Place of Business:

3590 SOUTH STATE ROAD 7
33 - 34
MIRAMAR, FL 33023

New Principal Place of Business:

3590 SOUTH STATE ROAD 7
33
MIRAMAR, FL 33023

Current Mailing Address:

3590 SOUTH STATE ROAD 7
33 - 34
MIRAMAR, FL 33023

New Mailing Address:

3590 SOUTH STATE ROAD 7
33
MIRAMAR, FL 33023

FEI Number: 27-4673100 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAYLOR-DUNCAN, MARILYN
8935 SW 163 TERRACE
PALMETTO BAY, FL 33157 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: P
Name: NOEL, IAN
Address: 9800 LA CIENEGA BLVD SUITE 400
City-St-Zip: INGLEWOOD, CA 90301

Title: MGR
Name: LEWIS, LA VERNE
Address: 8033 NW 114 PATH
City-St-Zip: DORAL, FL 33178

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: IAN NOEL P 04/29/2011

Electronic Signature of Signing Officer or Director Date