## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000058374

Entity Name: A1 HOMECHOICE, INC.

FILED Jan 12, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12611 SULLIVAN ROAD 25650 MONROE STREET CLERMONT, FL 34711 SUITE A

SUITE A ASTATULA, FL 34705, FL 34705

AGTATOLA, 1 L 34703, 1 L 34703

Current Mailing Address: New Mailing Address:

12611 SULLIVAN ROAD PO BOX 5

CLERMONT, FL 34711 ASTATULA, FL 34705

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JAMES, DAVID E 12611 SULLIVAN ROAD CLERMONT, FL 34711

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 JAMES, DAVID E
 Name:
 JAMES, DAVID E

 Address:
 12611 SULLIVAN ROAD
 Address:
 12611 SULLIVAN ROAD

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

Title: D ( ) Delete Title: PRES (X) Change ( ) Addition

Name:MOSKOWITZ, MARK JName:MOSKOWITZ, MARK JAddress:300 MAGNOLIA OAK COURTAddress:300 MAGNOLIA OAK COURTCity-St-Zip:LONGWOOD, FL 32779City-St-Zip:LONGWOOD, FL 32779

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID JAMES VP 01/12/2002