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

TREASURER

SIGNATURE: MILDRED B.SOWERS

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728241

Entity Name: ENGLEWOOD MEALS ON WHEELS, INC.

Current Principal Place of Business:

400 LOMA LINDA ENGLEWOOD, FL 34223

Current Mailing Address:

400 LOMA LINDA PO BOX 782 ENGLEWOOD, FL 34295 US

FEI Number: 59-1734735

Name and Address of Current Registered Agent:

HANEWINCKEL, DEAN 2800 PLACIDA RD. STE. 110 ENGLEWOOD, FL 34224 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

| Title | TD | Title | S |
|-----------------|----------------------|-----------------|----------------------|
| Name | SOWERS, MILDRED B | Name | COURT, SANDRA |
| Address | 77 WINDSOR DR | Address | 2112 MISSISSIPPI AVE |
| City-State-Zip: | ENGLEWOOD FL 34223 | City-State-Zip: | ENGLEWOOD FL 34224 |
| Title | DIRECTOR | | |
| Name | LAVHIRA, WILLIAM DR. | | |
| Address | 94 LONG MEADOW LANE | | |
| City-State-Zip: | ROTONDA FL 33947 | | |

FILED Mar 03, 2017 Secretary of State CC7005892964

Certificate of Status Desired: No

03/03/2017 Date

Date