2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2014
Secretary of State
CC1035502351

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Entity Name: A TOUCH OF HOPE HOME CARE SERVICES, INC.

Current Principal Place of Business:

5104 NORTH ORANGE BLOSSOM TRAIL
SUITE #119
ORLANDO, FL 32810

Current Mailing Address:

5104 NORTH ORANGE BLOSSOM TRAIL
SUITE #119
ORLANDO, FL 32810 US

FEI Number: 51-0597716

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, SAMUEL TM.ED.
3881 NORTH LAKE ORLANDO PARKWAY
ORLANDO, FL 32808 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 — Date

Officer/Director Detail :

Title	D
Name	WRIGHT, SAMUEL T
Address	607 GRAND ST.
City-State-Zip:	ORLANDO FL 32805

Title	D
Name	WRIGHT-PERRY, STELLA
Address	2229 LEE ST.
City-State-Zip:	BRUNSWICK GA 31520

Title	CORRESPONDING SECRETARY
Name	ANTHONY, TRACY
Address	5104 NORTH ORANGE BLOSSOM TRAIL SUITE 119
City-State-Zip:	ORLANDO FL 32810

Title	ASST. SECRETARY
Name	THOMAS, SHAMARA
Address	2229 LEE ST
City-State-Zip:	BRUNSWICK GA 31520

Title	C
Name	LECOUNTE, FLOSSIE
Address	1065 KEITH DR
City-State-Zip:	HINESVILLE GA 31313

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.

SIGNATURE: SAMUEL T. WRIGHT FOUNDER / PRESIDENT 02/12/2014

Electronic Signature of Signing Officer/Director Detail — Date