

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 401614

Entity Name: VISITING HOMEMAKER SERVICE OF BROWARD COUNTY, INC.**Current Principal Place of Business:**3570 KEITH STREET, N.W.
CLEVELAND, TN 37312**Current Mailing Address:**3570 KEITH STREET, N.W.
CLEVELAND, TN 37312 US**FEI Number: 59-1439214****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	DP
Name	PRESTON, FORREST L
Address	3570 KEITH STREET, N.W.
City-State-Zip:	CLEVELAND TN 37312

Title	VPTSD
Name	CROOKS, JOANNA
Address	3570 KEITH STREET, N.W.
City-State-Zip:	CLEVELAND TN 37312

Title	AS
Name	CROSS, CINDY S
Address	3570 KEITH STREET, N.W.
City-State-Zip:	CLEVELAND TN 37312

Title	AS
Name	THURMOND, JOAN E
Address	3570 KEITH STREET, N.W.
City-State-Zip:	CLEVELAND TN 37312

Title	CTO
Name	SWANKER, RICHARD
Address	3570 KEITH STREET, NW
City-State-Zip:	CLEVELAND TN 37312

Title	EXECUTIVE VICE PRESIDENT
Name	WEBB, AARON D
Address	3570 KEITH STREET, N.W.
City-State-Zip:	CLEVELAND TN 37312

Title	TREASURER
Name	ZIEGLER, STEVE
Address	3570 KEITH STREET, N.W.
City-State-Zip:	CLEVELAND TN 37312

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: JOAN E. THURMOND**ASSISTANT SECRETARY 03/23/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date