

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105709

Entity Name: EXTREME CARE PLUS, INC.

Current Principal Place of Business:

1909 REYNOLDS RD
LAKELAND, FL 33801-2345

Current Mailing Address:

1909 REYNOLDS RD
LAKELAND, FL 33801-2345 US

FEI Number: 59-3682088

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEESE, ROSIE R
1909 REYNOLDS RD
LAKELAND, FL 33801-2345 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 P D
Name DEESE, ROSIE R
Address 1909 REYNOLDS RD
City-State-Zip: LAKELAND FL 33815-2345

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: ROSIE R. DEESE

PRESIDENT

03/05/2015

Electronic Signature of Signing Officer/Director Detail

Date