

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000112910

Entity Name: ANNIE WILSON HOMECARE, INC.

Current Principal Place of Business:

1225 WEST BEAVER STREET
SUITE 114
JACKSONVILLE, FL 32204

Current Mailing Address:

1225 WEST BEAVER STREET
SUITE 114
JACKSONVILLE, FL 32204 US

FEI Number: 01-0575369

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, ANNIE DORIS
1225 WEST BEAVER STREET
SUITE 114
JACKSONVILLE, FL 32204 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: ANNIE DORIS BROWN

01/11/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name BROWN, ANNIE DORIS
Address 2403 BROWARD ROAD
City-State-Zip: JACKSONVILLE FL 32218

Title OFFICE MANAGER
Name BROWN, ANNIE
Address 1225 WEST BEAVER STREET
 SUITE 114
City-State-Zip: JACKSONVILLE FL 32204

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: ANNIE BROWN

PRESIDENT

01/11/2021

Electronic Signature of Signing Officer/Director Detail

Date