2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000112910

Entity Name: ANNIE WILSON HOMECARE, INC.

Current Principal Place of Business:

2403 BROWARD ROAD JACKSONVILLE. FL 32218

Current Mailing Address:

2403 BROWARD ROAD JACKSONVILLE. FL 32218 US

FEI Number: 01-0575369 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, ANNIE DORIS 2403 BROWARD ROAD JACKSONVILLE, FL 32218 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 03/25/2016

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRES

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

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 DORIS BROWN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT/CEO

03/25/2016

FILED Mar 25, 2016

Secretary of State

CC1537319653

Date

Date