

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000031190

Entity Name: BISHOP HOME CARE, INC.**Current Principal Place of Business:**1627 EAST 8TH STREET
JACKSONVILLE, FL 32206**Current Mailing Address:**1627 EAST 8TH STREET
JACKSONVILLE, FL 32206**FEI Number:** 20-2539329**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BISHOP HOME CARE INC.
16308 MAGNOLIA GROVE WAY
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:** MARY R MCGEE

01/03/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name MCGEE, GEORGE
Address 16308 MAGNOLIA GROVE WAY
City-State-Zip: JACKSONVILLE FL 32218

Title EXECUTIVE SECRETARY
Name MCGEE, MARY R
Address 16308 MAGNOLIA GROVE WAY
City-State-Zip: JACKSONVILLE FL 32218

Title TREASURER
Name RICHARDSON, ANDREW MD
Address 5620 GLADEWOOD DRIVE
City-State-Zip: JACKSON MS 39211

Title CORRESPONDING SECRETARY
Name WATTS, SARAH
Address 645 JESSIE STREET
City-State-Zip: JACKSONVILLE FL 32206

Title CFO
Name MCGEE, GEORGE
Address 16308 MAGNOLIA GROVE WAY
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: MARY R MCGEE**EXECUTIVE SECRETARY** 01/03/2023

Electronic Signature of Signing Officer/Director Detail

Date