

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000014543

Entity Name: COMMUNITY THERAPY HOME CARE, INC.

Current Principal Place of Business:

5223 PARK BLVD.
SUITE 201
PINELLAS PARK, FL 33781

Current Mailing Address:

5223 PARK BLVD.
SUITE 201
PINELLAS PARK, FL 33781

FEI Number: 20-8685594

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MACCOLLUM, ELAINE R
8140 BAYHAVEN DR.
SEMINOLE, FL 33776 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/S	Title	T/VP
Name	MACCOLLUM, STUART W	Name	MACCOLLUM, ELAINE R
Address	8140 BAYHAVEN DR.	Address	8140 BAYHAVEN DR.
City-State-Zip:	SEMINOLE FL 33776	City-State-Zip:	SEMINOLE FL 33776

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: ELAINE MACCOLLUM

SECRETARY

04/23/2015

Electronic Signature of Signing Officer/Director Detail

Date