## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000018369

Entity Name: WHISPERING PINES HOME CARE, INC.

**Current Principal Place of Business:** 

8830 SW 196 DRIVE CUTLER BAY, FL 33157

**Current Mailing Address:** 

8830 SW 196 DRIVE CUTLER BAY. FL 33157 US

FEI Number: 26-1994968 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRIETO, ANTONIO 8830 SW 196 DRIVE CUTLER BAY, FL 33157 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

FILED Apr 27, 2014

**Secretary of State** 

CC8367152019

## Officer/Director Detail:

Title F

Name PRIETO, ANTONIO
Address 8830 SW 196 DRIVE
City-State-Zip: CUTLER BAY FL 33157

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: ANTONIO PRIETO

**PRESIDENT** 

04/27/2014

Date