

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000089916

Entity Name: NATIONAL HOME HEALTH CARE VOLUSIA, INC.

Current Principal Place of Business:

1555 SAXON BLVD
303
DELTONA, FL 32725

Current Mailing Address:

1555 SAXON BLVD
303
DELTONA, FL 32725

FEI Number: 27-3857263

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSAAD, EMAD
13568 HIDDEN FOREST CIRCLE
ORLANDO, FL 32828 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 DPT
Name MOSAAD, EMAD
Address 13568 HIDDEN FOREST CIRCLE
City-State-Zip: ORLANDO FL 32828

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: MOSAAD EMAD

DPT

03/31/2015

Electronic Signature of Signing Officer/Director Detail

Date