

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000063958

**Entity Name:** CONSOLING HANDS HOME HEALTH SERVICES INC.

**Current Principal Place of Business:**

211 N. LAKE COURT  
KISSIMEE, FL 34743

**Current Mailing Address:**

211 N. LAKE COURT  
KISSIMEE, FL 34743

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

THOMAS, BRENDA F  
211 N. LAKE COURT  
KISSIMEE, FL 34743 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  
Name THOMAS, BRENDA F  
Address 211 N. LAKE COURT  
City-State-Zip: KISSIMEE FL 34743

*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: BRENDA THOMAS**

**OWNER**

**04/30/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date