SIGNATURE:

Officer/Director Detail :			
Title	PRES	Title	VP
Name	DUSSAULT, MARK E SR	Name	DUSSAULT, GINGER L
Address	PO BOX 9472	Address	PO BOX 9472
City-State-Zip:	NAPLES FL 34101	City-State-Zip:	NAPLES FL 34101
T	7054	T :41 -	050
Title	TREA	Title	SEC
Name	DUSSAULT, MARK E SR	Name	DUSSAULT, GINGER L
Address	PO BOX 9472	Address	PO BOX 9472
City-State-Zip:	NAPLES FL 34101	City-State-Zip:	NAPLES FL 34101

Current Principal Place of Business: 1891 ELSA STREET С NAPLES, FL 34109

Current Mailing Address:

PO BOX 9472 NAPLES, FL 34101

FEI Number: 45-3655161

Name and Address of Current Registered Agent:

Entity Name: HRI - HOME REHABILITATORS INC.

DUSSAULT, MARK E SR 1891 ELSA STREET С NAPLES, FL 34109 US

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. PRESIDENT

SIGNATURE: MARK E. DUSSAULT

Electronic Signature of Signing Officer/Director Detail

2018 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT DOCUMENT# P14000032152

FILED Apr 20, 2018 Secretary of State CC8613439707

Certificate of Status Desired: No

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.

Electronic Signature of Registered Agent

Date

04/20/2018

Date