

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000031422

Entity Name: INTERIM HHA OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

3440 US 1 SOUTH, BLDG 400 STE 404
SAINT AUGUSTINE, FL 32086

Current Mailing Address:

7999 PHILIPS HWY
SUITE 304
JACKSONVILLE, FL 32256 US

FEI Number: 59-3182292

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REEVES, GLENN R
7999 PHILIPS HWY
SUITE 304
JACKSONVILLE, FL 32256 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 PD
Name REEVES, GLENN R
Address 11663 SPARKLEBERRY LANE
City-State-Zip: JACKSONVILLE FL 32223

Title SD
Name REEVES, BONNIE S
Address 11663 SPARKLEBERRY LANE
City-State-Zip: JACKSONVILLE FL 32223

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: GLENN R. REEVES

PRESIDENT

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date