

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 639784

FILED
Apr 10, 2009
Secretary of State

Entity Name: ISLAND HOME CARE, INC.

Current Principal Place of Business:

5400 87TH ST
WABASSO, FL 32958 US

New Principal Place of Business:

1385 RIVER RIDGE DRIVE
VERO BEACH, FL 329632564 US

Current Mailing Address:

1385 RIVER RIDGE DRIVE
VERO BEACH, FL 329639536

New Mailing Address:

1385 RIVER RIDGE DRIVE
VERO BEACH, FL 329632564 US

FEI Number: 59-1983083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HMIELEWSKI, CHARLES P.
1385 RIVER RIDGE DRIVE
VERO BEACH, FL 329639536 US

Name and Address of New Registered Agent:

HMIELEWSKI, CHARLES P PRES
1385 RIVER RIDGE DRIVE
VERO BEACH, FL 329632564 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: CHARLES P HMIELEWSKI

04/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HMIELEWSKI, CHARLES P
Address: 1385 RIVER RIDGE DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: ST () Delete
Name: HMIELEWSKI, SHARON
Address: 1385 RIVER RIDGE DRIVE
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHARON HMIELEWSKI

ST

04/10/2009

Electronic Signature of Signing Officer or Director

Date