2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2009
Secretary of State

DOCUMENT# 724973

Entity Name: ELDER CARE SERVICES, INC.

Current Principal Place of Business:

JAMES M. CROUTEAU
2518 W TENNESSEE ST.
TALLAHASSEE, FL 32304

New Principal Place of Business:

JAMES M. CROTEAU
2518 W TENNESSEE ST.
TALLAHASSEE, FL 32304

Current Mailing Address:

JAMES M. CROUTEAU
2518 W TENNESSEE ST.
TALLAHASSEE, FL 32304

New Mailing Address:

JAMES M. CROTEAU
2518 W TENNESSEE ST.
TALLAHASSEE, FL 32304

FEI Number: 59-1426079 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CROTIEAU, JAMES
2518 WEST TENNESSEE STREET
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

CROTEAU, JAMES M PCEO
2518 WEST TENNESSEE STREET
TALLAHASSEE, FL 32304 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: JAMES CROTEAU 02/11/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete
Name: CROTEAU, JAMES M
Address: 2518 WEST TENNESSEE STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: D ( ) Delete
Name: POPLE, RANDY
Address: 217 NORTH MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: V ( ) Delete
Name: HINKLE, DOTTIE
Address: 2747 BLAIRSTONE CT.
City-St-Zip: TALLAHASSEE, FL 32301

Title: CD ( ) Delete
Name: GUEMPLE, RANDY R
Address: 293 THORNBERG DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: T ( ) Delete
Name: JACOBS, DUANE E
Address: 3106 AVON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete
Name: MERRICK, WILL L
Address: 3466 ZILLAH ST
City-St-Zip: TALLAHASSEE, FL 32305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CD (X) Change ( ) Addition
Name: POPLE, RANDY
Address: 217 NORTH MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

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

Title: SD (X) Change ( ) Addition
Name: HARRIS, ANNIE S
Address: 436 WEST GEORGIA STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: CFOT (X) Change ( ) Addition
Name: JACOBS, DUANE E
Address: 3106 AVON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD (X) Change ( ) Addition
Name: WEEDEN, SHARON
Address: 601 NORTH MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DUANE E. JACOBS CFO 02/11/2009
Electronic Signature of Signing Officer or Director Date