

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002174

FILED
Jul 31, 2006
Secretary of State

Entity Name: FAMILY HOME HEALTH CENTERS, INC.

Current Principal Place of Business:

801 WEST ANN ARBOR TRAIL, STE. 200
PLYMOUTH, MI 48170

New Principal Place of Business:

Current Mailing Address:

801 WEST ANN ARBOR TRAIL, STE. 200
PLYMOUTH, MI 48170

New Mailing Address:

FEI Number: 02-0718322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: RUARK, KEVIN
Address: 11373 WILLOW WOOD LANE
City-St-Zip: PLYMOUTH, MI 48170

Title: VPD () Delete
Name: PILKINGTON, JAMES
Address: 1400 COLONIAL BLVD. #43
City-St-Zip: FORT MYERS, FL 33907

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: RUARK, KEVIN
Address: 801 W. ANN ARBOR TRAIL SUITE 200
City-St-Zip: PLYMOUTH, MI 48170

Title: CDO (X) Change () Addition
Name: PILKINGTON, JAMES
Address: 801 W. ANN ARBOR TRAIL SUITE 200
City-St-Zip: PLYMOUTH, MI 48170

Title: CFO () Change (X) Addition
Name: JAMES, MITCHELL
Address: 801 W ANN ARBOR TRAIL SUITE 200
City-St-Zip: PLYMOUTH, MI 48170

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES MITCHELL

CFO

07/31/2006

Electronic Signature of Signing Officer or Director

Date