

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003444

Entity Name: RESPCARE, INC.

FILED  
Mar 17, 2009  
Secretary of State

## Current Principal Place of Business:

6601 LYONS ROAD #B1  
COONUT CREEK, FL 33073

## New Principal Place of Business:

6601 LYONS ROAD #B1-B4  
COONUT CREEK, FL 33073

## Current Mailing Address:

6601 LYONS ROAD #B1  
COONUT CREEK, FL 33073

## New Mailing Address:

6601 LYONS ROAD #B1-B4  
COONUT CREEK, FL 33073

FEI Number: 76-0776901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LERNER, ALLAN M  
2888 EAST OAKLAND PARK BOULEVARD  
FORT LAUDERDALE, FL 33306 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HERNANDEZ, SHARA  
Address: 6601 LYONS ROAD #B1  
City-St-Zip: COONUT CREEK, FL 33073

Title: D ( ) Delete  
Name: SHER, BRUCE  
Address: 6601 LYONS ROAD #B1  
City-St-Zip: COONUT CREEK, FL 33073

## 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: M ASCH

MNGR

03/17/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date