

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003633

FILED
Apr 19, 2011
Secretary of State

Entity Name: UNITED ADULT CARE SERVICES, INC.

Current Principal Place of Business:

3804 NORTHLAKE BOULEVARD
PALM BEACH GARDENS, FL 33403

New Principal Place of Business:

11448 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065

Current Mailing Address:

P.O. BOX 451851
SUNRISE, FL 33345

New Mailing Address:

FEI Number: 26-3929438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD., SUITE A
TAMPA, FL 33688 US

Name and Address of New Registered Agent:

LMF SMITH & ASSOCIATES, P.A.
11448 W. SAMPLE RD
CORAL SPRINGS, FL 33065 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: LISA M. SMITH

04/19/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SMITH, LISA M
Address: P.O. BOX 451851
City-St-Zip: SUNRISE, FL 33345

Title: CFO
Name: SMITH, MARTIN A
Address: P.O. BOX 451851
City-St-Zip: SUNRISE, FL 33345

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: LISA M. SMITH

PD

04/19/2011

Electronic Signature of Signing Officer or Director

Date