

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000397

FILED
Feb 09, 2004
Secretary of State

Entity Name: BIOMEDICAL HOME CARE, INC.

Current Principal Place of Business:

6501 DEANE HILL DR
KNOXVILLE, TN 37919 US

New Principal Place of Business:

Current Mailing Address:

6501 DEANE HILL DR
KNOXVILLE, TN 37919 US

New Mailing Address:

FEI Number: 56-1378753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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: DAHL, ALAN C
Address: 6501 DEANE HILL DR.
City-St-Zip: KNOXVILLE, TN 37919

Title: S () Delete
Name: MORRIS, JOHN E
Address: 6501 DEANE HILL
City-St-Zip: KNOXVILLE, TN 37919

Title: C () Delete
Name: EATON, J. STEPHEN
Address: 1200 ABERNATHY RD., STE 1700
City-St-Zip: ATLANTA, GA 30328

Title: D () Delete
Name: IZZO, FRANK
Address: 1919 PENNSYLVANIA AVE.
City-St-Zip: WASHINGTON, DC 20006

Title: D () Delete
Name: GAFFNEY, MIKE
Address: 1919 PENNSYLVANIA AVE.
City-St-Zip: WASHINGTON, DC 20006

Title: D () Delete
Name: WILLIAMS, G. CABELL
Address: 1919 PENNSYLVANIA AVE.
City-St-Zip: WASHINGTON, DC 20006

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HELLER, JOHN F III
Address: 6501 DEANE HILL DR.
City-St-Zip: KNOXVILLE, TN 37919

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

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

Title: D (X) Change () Addition
Name: GAFFNEY, MIKE
Address: 1919 PENNSYLVANIA AVE.
City-St-Zip: WASHINGTON, DC 20006

Title: D (X) Change () Addition
Name: DAHL, ALAN
Address: 1200 ABERNATHY ROAD SUITE 1700
City-St-Zip: ATLANTA, GA 30328

Title: AS (X) Change () Addition
Name: DANIELS, CARRIE
Address: 6501 DEANE HILL ROAD
City-St-Zip: KNOXVILLE, TN 37919

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARRIE DANIELS

AS

02/09/2004

Electronic Signature of Signing Officer or Director

Date