2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G07577

WHITE PLAINS, NY 10601

City-St-Zip:

Entity Name: MARANATHA HOME CARE, INC

FILED Mar 19, 2009 Secretary of State

,					
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
5440 PARK CENTRAL COURT					
SUITE # 2 NAPLES, F		IS			
Current M	lailing Addres	s:	New Mailing Address	New Mailing Address:	
SUITE 120	TON AVENUE) AINS, NY 106				
FEI Number:	: 59-2329885	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
5440 PARI SUITE 2 NAPLES, F	E, ARTHUR K CENTRAL C FL 34109 US named entity s e of Florida.		he purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
		ic Signature of Registered	Agent	Date	
Election Car	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () SCHWABE, AR' 360 HAMILTON WHITE PLAINS	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	ST () SCHWABE, PAI 360 HAMILTON		Title: Name: Address:	() Change () Addition	

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: ARTHUR SCHWABE PD 03/19/2009