

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L33089

FILED
Mar 21, 2006
Secretary of State

Entity Name: HOUSECALL INFUSION ALTERNATIVES, INC.

Current Principal Place of Business:

1400 CENTERPOINT BLVD
STE 100
KNOXVILLE, TN 379321579 US

New Principal Place of Business:

11100 MEAD ROAD
SUITE 300
BATON ROUGE, LA 70816 US

Current Mailing Address:

1400 CENTERPOINT BLVD
STE 100
KNOXVILLE, TN 379321579 US

New Mailing Address:

11100 MEAD ROAD
SUITE 300
BATON ROUGE, LA 70816 US

FEI Number: 61-1170065

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
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: HELLER, LADONNA
Address: 1400 CENTERPOINT BLVD
City-St-Zip: KNOXVILLE, TN 379321579 US

Title: S () Delete
Name: MORRIS, JOHN E
Address: 1400 CENTERPOINT BLVD
City-St-Zip: KNOXVILLE, TN 379321579 US

Title: AS () Delete
Name: DANIELS, CARRIE
Address: 1400 CENTERPOINT BLVD
City-St-Zip: KNOXVILLE, TN 379321579 US

Title: D () Delete
Name: FERRIS, GEORGE
Address: ALLIED CAPITAL, 1919 PA AVE
City-St-Zip: WASHINGTON, DC 20006

Title: D (X) Delete
Name: DAHL, ALAN
Address: 5445 TRIANGLE PARKWAY, STE. 260
City-St-Zip: NORCROSS, GA 30092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GRAHAM, LARRY
Address: 11100 MEAD ROAD, SUITE 300
City-St-Zip: BATON ROUGE, LA 70816 US

Title: VPD (X) Change () Addition
Name: BORNE, WILLIAM
Address: 11100 MEAD ROAD, SUITE 300
City-St-Zip: BATON ROUGE, LA 70816 US

Title: TD (X) Change () Addition
Name: BROWNE, GREGORY
Address: 11100 MEAD ROAD, SUITE 300
City-St-Zip: BATON ROUGE, LA 70816 US

Title: S (X) Change () Addition
Name: RASMUSSEN, CELESTE
Address: 11100 MEAD ROAD, SUITE 300
City-St-Zip: BATON ROUGE, LA 70816

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

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: CELESTE RASMUSSEN

S

03/21/2006

Electronic Signature of Signing Officer or Director

_____ Date