

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L58889

FILED
Jan 12, 2006
Secretary of State

Entity Name: JAN'S HOME CARE, INC.

Current Principal Place of Business:

620 EAST NEW YORK AVE
DELAND, FL 32724 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3126
DELAND, FL 32724 US

New Mailing Address:

FEI Number: 59-3003281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSTLUND, GRANT
620 EAST NEW YORK AVE
DELAND, FL 32724 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: D () Delete
Name: TUCKER, GEORGE
Address: 823 AVENIDA PALOS VERDES
City-St-Zip: PALM SPRINGS, CA

Title: P () Delete
Name: SCHULER, JET
Address: 2020 W 9TH AVE
City-St-Zip: OSHKOSH, WI 54904

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 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: SANDRA LITZINGER

ADM

01/12/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date