2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000900

Entity Name: TELE-HOMECARE NONPROFIT CORPORATION

FILED Jan 22, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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12794 WEST FOREST HILL BLVD., SUITE 33A 537 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411

Current Mailing Address: New Mailing Address:

12794 WEST FOREST HILL BLVD., SUITE 33A 11373 WILLOW WOOD LANE WELLINGTON, FL 33414 PLYMOUTH, MI 48170

FEI Number: 65-1075922 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:

TUMMINIA, MELINDA M

11220 KEYSTONE DR

JUPITER, FL 33458 US

KEVIN, RUARK
7654 BAY LAKE
FORT MYERS, FL 33907 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: KEVIN R RUARK 01/22/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 TUMMINIA, MELINDA M
 Name:

 Address:
 12794 WEST FOREST HILL BLVD., SUITE 33A
 Address:

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 BENNETT, CHERYL
 Name:
 PILKINGTON, JAMES H

 Address:
 12794 WEST FOREST HILL BLVD., SUITE 33A
 Address:
 8151 LAS PALMAS WAY

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:
 NAPLES, FL 34109

Title: D () Delete Title: D (X) Change () Addition

Name: MEDINA, ERNESTO Name: RUARK, KEVIN R

Address: 12794 WEST FOREST HILL BLVD., SUITE 33A Address: 11373 WILLOW WOOD LANE City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: PLYMOUTH, MI 48170

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN R RUARK D 01/22/2004