

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 11, 2009
Secretary of State

DOCUMENT# N06000006550

Entity Name: MITCHELL'S HOUSE OF CARE INC.

Current Principal Place of Business:115 CLIFTON ROAD
WEST PARK
HOLLYWOOD, FL 33023**New Principal Place of Business:****Current Mailing Address:**115 CLIFTON ROAD
WEST PARK
HOLLYWOOD, FL 33023**New Mailing Address:**

FEI Number: 20-5132494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MITCHELL, PEARLENE
115 CLIFTON ROAD
HOLLYWOOD, FL 33023 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

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: MITCHELL, PEARLENE
Address: 115 CLIFTON ROAD WEST PARK
City-St-Zip: HOLLYWOOD, FL 33023Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VP () Change (X) Addition
Name: MITCHELL, FRANKLIN G
Address: 115 CLIFTON ROAD WEST PARK
City-St-Zip: HOLLYWOOD, FL 33023Title: SEC () Change (X) Addition
Name: DURANT, LINROY
Address: 115 CLIFTON ROAD WEST PARK
City-St-Zip: HOLLYWOOD, FL 33023Title: TRUS () Change (X) Addition
Name: CHIN, CHRISTOPHER
Address: 10461 SW 163RD STREET
City-St-Zip: MIAMI, FLTitle: TREA () Change (X) Addition
Name: GOFF, JUDITH
Address: 20157 NW 38 AVE
City-St-Zip: MIAMI, FL 33055

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

SIGNATURE: PEARLENE MITCHELL

CEO

09/11/2009

Electronic Signature of Signing Officer or Director

Date