

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011073

FILED
Apr 16, 2009
Secretary of State

Entity Name: INASMUCH COMPANION SERVICES, INC.

Current Principal Place of Business:

1007 WEST WRIGHT STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

1007 WEST WRIGHT STREET
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 76-0805805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, VERA G
1007 WEST WRIGHT STREET
PENSACOLA, FL 32501 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: SULLIVAN, JOSEPH L
Address: 1938 GARY CIRCLE
City-St-Zip: PENSACOLA, FL 32505

Title: VD () Delete
Name: SULLIVAN, VERA G
Address: 1938 GARY CIRCLE
City-St-Zip: PENSACOLA, FL 32505

Title: TD () Delete
Name: KNIGHT, SADIE
Address: 309 SEAMARK LANE
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: VERA G SULLIVAN

VD

04/16/2009

Electronic Signature of Signing Officer or Director

Date