2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2011
Secretary of State

DOCUMENT# N99000001389

Entity Name: BAYCARE HOME CARE, INC.

Current Principal Place of Business:

8452 118TH AVENUE N.
LARGO, FL 33773

New Principal Place of Business:

Current Mailing Address:

8452 118TH AVENUE N.
LARGO, FL 33773

New Mailing Address:

FEI Number: 59-3582520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARQUARDT, EMIL C JR.
MACFARLANE FERGUSON & MCMULLEN
625 COURT ST., 2ND FLOOR
CLEARWATER, FL 33756 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
Name: CROCKETT, DENTON W JR
Address: 8452 118TH AVENUE N.
City-St-Zip: LARGO, FL 33773

Title: VPD
Name: MASON, STEPHEN R
Address: 16331 BAY VISTA DRIVE
City-St-Zip: CLEARWATER, FL 33760

Title: STD
Name: WATERS, GLENN
Address: 300 PINELLAS STREET
City-St-Zip: CLEARWATER, FL 33756

Title: D
Name: SWEENEY, DANIEL
Address: 8452 118TH AVENUE N.
City-St-Zip: LARGO, FL 33773

Title: D
Name: INZINA, THOMAS P
Address: 16331 BAY VISTA DRIVE
City-St-Zip: CLEARWATER, FL 33760

Title: D
Name: RIBBLE, THOMAS W
Address: 8452 118TH AVENUE NORTH
City-St-Zip: LARGO, FL 33773

I hereby 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 all other like empowered.

SIGNATURE: EMIL C. MARQUARDT, JR., ESQ. RA 02/15/2011

Electronic Signature of Signing Officer or Director — Date