

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001950

Entity Name: AMERICAN LIFECARE, INC.

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

2487 MONACO TERRACE
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

2487 MONACO TERRACE
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-0927649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, W. JAMES
2487 MONACO TERRACE
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

DYER, SUSAN
2487 MONACO TERRACE
PALM BEACH GARDENS, FL 33410 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: SUSAN DYER

04/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STEVENS, W. JAMES
Address: 2487 MONACO TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: DYER, SUSAN
Address: 2487 MONACO TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: STEVENS, MATTHEW K
Address: 2487 MONACO TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEVENS, W. JAMES
Address: 2487 MONACO TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: PD (X) Change () Addition
Name: DYER, SUSAN
Address: 2487 MONACO TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D (X) Change () Addition
Name: STEVENS, RAMSAY M
Address: 2487 MONACO TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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

SIGNATURE: SUSAN DYER

P

04/18/2007

Electronic Signature of Signing Officer or Director

Date