

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000024231

FILED  
Apr 23, 2010  
Secretary of State

Entity Name: JOY OF LIVING CARE SERVICES INC.

**Current Principal Place of Business:**

5710 COCONUT RD  
WEST PALM BEACH, FL 33413

**New Principal Place of Business:**

**Current Mailing Address:**

5710 COCONUT RD  
WEST PALM BEACH, FL 33413

**New Mailing Address:**

FEI Number: 65-0985846

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DOUGLAS, IRIS A  
5710 COCONUT RD  
WEST PALM BEACH, FL 33413 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: DOUGLAS, IRIS A  
Address: 465 COTTAGEWOOD LANE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP  
Name: DOUGLAS, EUSTACE  
Address: 465 COTTAGEWOOD LANE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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

SIGNATURE: IRIS DOUGLAS

PRES

04/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date