2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000076418

Entity Name: MOMENTUM HEALTHCARE, INC.

FILED Feb 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2030 SOUTHSIDE BLVD. SUITE 2 JACKSONVILLE, FL 32216 US **New Mailing Address: Current Mailing Address:** PO BOX 19425 JACKSONVILLE, FL 32245 US FEI Number: 59-3665808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALBERT, JERRY ALBERT, JERRY G 2030-2 SOUTHSIDE BLVD. 2030-2 SOUTHSIDE BLVD. JACKSONVILLE, FL 32216 US JACKSONVILLE, FL 32216 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: JERRY G. ALBERT 02/22/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ALBERT, JERRY G Name: Name: 1415 BIG TREE LANE Address: Address: City-St-Zip: NEPTUNE BEACH, FL 32226 City-St-Zip: Title: Title: () Change () Addition () Delete WILTSHIRE, LINDA K Name: Name: 27 MACKERAL ST. Address: Address: PONTE VEDRA BEACH, FL 32082 City-St-Zip: 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY G. ALBERT **PRES** 02/22/2008