2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000088955

Entity Name: CARE ON WHEELS, INC.

FILED Mar 01, 2007 Secretary of State

US

3530 1ST. AVE. N.

STE 221

SAINT PETERSBURG, FL 33713

Current Mailing Address:

New Mailing Address:

3530 1ST. AVE. N.

STE 221

SAINT PETERSBURG, FL 33713

8211 49TH STREET NORTH

8211 49TH STREET NORTH

SAINT PETERSBURG, FL 33781

SAINT PETERSBURG, FL 33781 US

FEI Number: 59-3676004 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:

KURPIERS, RONALD J II 696 1ST AVE. N. SUITE 304

ST. PETERSBURG, FL 33701 US

WINEBRENNER, JACK M 8950 MARTIN LUTHER KING N #130 ST. PETERSBURG, FL 33702

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: JACK M WINEBRENNER

03/01/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete JONES, MCKENZIE Name:

3530 1ST AVE NORTH STE 221 Address:

City-St-Zip: SAINT PETERSBURG, FL 33713

Title: () Delete

Name: Address:

City-St-Zip:

Title: () Delete Name:

Address

City-St-Zip:

Title: (X) Change () Addition

JONES, MCKENZIE Name:

8211 49TH STREET NORTH Address:

City-St-Zip: SAINT PETERSBURG, FL 33781 US

Title: () Change (X) Addition

Name: JOHNSON, KANETA J

19227 FISHERMANS BEND DRIVE Address:

LUTZ, FL 33558 US City-St-Zip:

Title: () Change (X) Addition

Name: ROZIER, TRINA

19227 FISHERMANS BEND DRIVE Address:

City-St-Zip: LUTZ, FL 33558 US

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

Ρ SIGNATURE: MCKENZIE JONES 03/01/2007