2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2004
Secretary of State

DOCUMENT# P00000108862

Entity Name: FLORIDA COMPANION CARE, INC.

Current Principal Place of Business:

5623 US 19 #237
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

PO BOX 2363
PALM HARBOR, FL 34682

New Mailing Address:

FEI Number: 59-3682714 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COOK, HOWARD
1722 MISSOURI AVE
CLEARWATER, FL 34675

Name and Address of New Registered Agent:

COOK, HOWARD
5623 US 19 #237
NEW PORT RICHEY, FL 34652

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: 01/13/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: COOK, JOY
Address: 1722 MISSOURI AVE S
City-St-Zip: CLEARWATER, FL 337561223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: COOK, JOY
Address: 5623 US 19 N
City-St-Zip: CLEARWATER, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOY COOK PSTD 01/13/2004
Electronic Signature of Signing Officer or Director — Date