

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000022577

Entity Name: H & A HOMECARE, INC.

FILED
Jun 22, 2009
Secretary of State

Current Principal Place of Business:

POST OFFICE BOX 1575
BOCA GRANDE, FL 33921

New Principal Place of Business:

428 W. 4TH STREET
BOCA GRANDE, FL 33921

Current Mailing Address:

POST OFFICE BOX 1575
BOCA GRANDE, FL 33921

New Mailing Address:

FEI Number: 65-1087901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRICKS, BRETT
1505 RAPHIS ROYALE
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

HENDRICKS, BRETT
428 W. 4TH STREET
BOCA GRANDE, FL 33921 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: _____

Electronic Signature of Registered Agent

06/22/2009

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: HENDRICKS, BRETT
Address: 1505 RAPHIS ROYALE
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: HENDRICKS, BRETT
Address: 428 W. 4TH STREET
City-St-Zip: BOCA GRANDE, FL 33921

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: BRETT HENDRICKS

PSD

06/22/2009

Electronic Signature of Signing Officer or Director

Date