2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000048226

FILED Jan 13, 2004 Secretary of State

Entity Name: WEBB HOME HEALTHCARE NETWORK CORP. **Current Principal Place of Business: New Principal Place of Business:** 5401 S KIRKMAN RD 310 ORLANDO, FL 32819 **New Mailing Address: Current Mailing Address:** 2739 WINDSOR HILL DR. WINDERMERE, FL 34786 FEI Number: 59-3725476 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEBB, FRED 2739 WINDSOR HILL DRIVE WINDERMERE, FL 34786 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete Title: (X) Change () Addition WEBB, AUDRENE WEBB, AUDRENE Name:

Title: Name: 2739 WINDSOR HILL DR 2739 WINDSOR HILL DR Address: Address: City-St-Zip: WINFDERMERE, FL 34786 City-St-Zip: WINDERMERE, FL 34786

Title: Title: () Change () Addition () Delete

Name: WEBB, FRED Name: 2739 WINDSOR HILL DR Address: Address: WINFDERMERE, FL 34786 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: AUDRENE WEBB 01/13/2004