2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000098117

Entity Name: HOME COMPANION SERVICES OF FLORIDA INC.

FILED Apr 22, 2008 Secretary of State

Littly Nan	ie. HOWE C	OWFAMION SERVICES C	JE ELORIDA, I	iivo.			
Current Principal Place of Business:				New Principal Place of Business:			
	ITUM BOULE BEACH, FL						
Current Mailing Address:				New Mailing Address:			
	ITUM BOULE BEACH, FL						
FEI Number:	65-1148400	FEI Number Applied For () FEI Nur	mber Not Applicable ()	Certificat	e of Status Desired()	
Name and	Address of (Current Registered Agen	t:	Name and Address	of New Regi	stered Agent:	
HORNECK 224 CITRU BOYNTON		33436 US		HORNECK, WILLIAM 224 CITRUS TRAIL BOYNTON BEACH, F		US	
The above in the State		submits this statement for	the purpose o	of changing its registere	ed office or re	egistered agent, or both,	
SIGNATURE: WILLIAM K. HORNECK				04/22/2008			
	Electro	nic Signature of Registered	d Agent			Date	
Election Cam	paign Financin	g Trust Fund Contribution ().	•				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	HORNECK, WI 224 CITRUS TI			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SCHER, EDWA 2407 QUANTUI) Delete ARD A M BOULEVARD ACH, FL 33426		Title: Name: Address: City-St-Zip:	() Change() Addition	

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: WILLIAM K. HORNECK VSTD 04/22/2008