

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079873

FILED  
May 16, 2006  
Secretary of State

Entity Name: HOME CARE GIVER SERVICES, INC.

## Current Principal Place of Business:

1801 S. FEDERAL HWY  
STE. 206  
DELRAY BEACH, FL 33483

## New Principal Place of Business:

## Current Mailing Address:

1801 S. FEDERAL HWY  
STE. 206  
DELRAY BEACH, FL 33483

## New Mailing Address:

FEI Number: 41-2057247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TILLEY, MICHAEL R ESQ  
2000 GLADES ROAD  
SUITE 306  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

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:

Title: C/D ( ) Delete  
Name: PERSICO, ANTHONY J  
Address: 1801 S. FEDERAL HWY  
City-St-Zip: DELRAY BEACH, FL 33483

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: ANTHONY J. PERSICO

PRES

05/16/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date