

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110317

Entity Name: CARE ONE OF FLORIDA INC.

FILED  
May 19, 2005  
Secretary of State

**Current Principal Place of Business:**

13017 SPRING HILL DRIVE  
SPRING HILL, FL 34609

**New Principal Place of Business:**

1814 CR 48  
BUSHNELL, FL 33513

**Current Mailing Address:**

13017 SPRING HILL DRIVE  
SPRING HILL, FL 34609

**New Mailing Address:**

5412 GOLDDUST ROAD  
SPRING HILL, FL 34609

FEI Number: 82-0569563

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAVIANO, STACIE S  
13017 SPRING HILL DRIVE  
SPRINGHILL, FL 34609 US

**Name and Address of New Registered Agent:**

LAVIANO, STACIE S  
5412 GOLDDUST ROAD  
SPRINGHILL, FL 34609 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: STACIE LAVIANO

05/19/2005

Electronic Signature of Registered Agent

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: D ( ) Delete  
Name: LAVIANO, STACIE S  
Address: P.O. BOX 15495  
City-St-Zip: BROOKSVILLE, FL 346049998

Title: D ( ) Delete  
Name: LAVIANO, ANTHONY P  
Address: P.O. BOX 15495  
City-St-Zip: BROOKSVILLE, FL 346049998

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LAVIANO, STACIE S  
Address: 5412 GOLDDUST ROAD  
City-St-Zip: SPRING HILL, FL 346049998

Title: D (X) Change ( ) Addition  
Name: LAVIANO, ANTHONY P  
Address: 5412 GOLDDUST ROAD  
City-St-Zip: SPRING HILL, FL 346049998

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: STACIE LAVIANO

D

05/19/2005

Electronic Signature of Signing Officer or Director

Date