2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132508

FILED May 01, 2009 Secretary of State

Entity Name: CONTINUOUS CARE HEALTH SERVICES CORP

Current Principal Place of Business:		New Principal Place of Business:		
200 LAKE 10	ELLENOR C	PR		
), FL 32809			
urrent Mailing Address:		ss:	New Mailing Address:	
	ELLENOR C	R		
10 RLANDO), FL 32809			
I Number:	45-0494126	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
200 LAKÉ	LEOTHA E ELLENOR D	PR		
RLANDO), FL 32809 (numaco of changing its registers	d office or registered egent or both
ne above the State	named entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both,
RLANDOne above	named entity e of Florida. RE:	submits this statement for the		
RLANDO ne above the State GNATUR	named entity e of Florida. RE: Electro		gent	ed office or registered agent, or both, Date
RLANDC ne above the State GNATUF accordancection Car	named entity of Florida. RE: Electro ce with s. 607.19	submits this statement for the nic Signature of Registered Aga(2)(b), F.S., the corporation did nig Trust Fund Contribution ().	gent not receive the prior notice.	Date
RLANDC ne above the State GNATUF accordancection Car	named entity e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Aga(2)(b), F.S., the corporation did nig Trust Fund Contribution ().	gent not receive the prior notice.	
RLANDO ne above the State GNATUF accordancection Car FFICERS	named entity of Florida. RE: Electro ce with s. 607.19 npaign Financir S AND DIRECTO	submits this statement for the nic Signature of Registered Age 33(2)(b), F.S., the corporation did not rust Fund Contribution ().	pent not receive the prior notice. ADDITIONS/CHANG Title:	Date
RLANDO ne above the State GNATUF accordane ection Car FFICERS le:	named entity of Florida. RE: Electro ce with s. 607.19 npaign Financir S AND DIRECT CEO (FRANCIS, KAF	submits this statement for the nic Signature of Registered Ag (2)(b), F.S., the corporation did ng Trust Fund Contribution (). TORS:) Delete REEN	pent not receive the prior notice. ADDITIONS/CHANG Title: Name:	Date ES TO OFFICERS AND DIRECTOR
RLANDO ne above the State GNATUF accordancection Car FFICERS le: ame: ldress:	named entity of Florida. RE: Electro ce with s. 607.11 npaign Financir S AND DIREC CEO (FRANCIS, KAR 7200 LAKE EL	submits this statement for the nic Signature of Registered Age 3(2)(b), F.S., the corporation did nig Trust Fund Contribution (). CTORS:) Delete REEN LENOR DR SUITE # 240	pent not receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR
RLANDO ne above the State GNATUF accordancection Car FFICERS le: lme: ldress: ty-St-Zip:	named entity of Florida. RE: Electro ce with s. 607.19 npaign Financir S AND DIREC CEO (FRANCIS, KAF 7200 LAKE EL ORLANDO, FL	submits this statement for the nic Signature of Registered Age 33(2)(b), F.S., the corporation did not get Trust Fund Contribution (). CTORS:) Delete REEN LENOR DR SUITE # 240 . 32809	pent ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition
RLANDO ne above the State GNATUF accordancection Car FFICER: le: ume: dress: ty-St-Zip: le:	named entity of Florida. RE: Electro ce with s. 607.19 mpaign Financir S AND DIRECT CEO (FRANCIS, KAR 7200 LAKE EL ORLANDO, FL	submits this statement for the nic Signature of Registered Age 33(2)(b), F.S., the corporation did not get Trust Fund Contribution (). CTORS:) Delete REEN LLENOR DR SUITE # 240 . 32809) Delete	pent not receive the prior notice. ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title:	Date ES TO OFFICERS AND DIRECTOR
RLANDO ne above the State GNATUF accordancection Car FFICERS le: ume: dress: ty-St-Zip: le: ume:	named entity of Florida. RE: Electro ce with s. 607.19 npaign Financir S AND DIRECT CEO (FRANCIS, KAF 7200 LAKE EL ORLANDO, FL VP (GOSHOP, LEC	submits this statement for the nic Signature of Registered Age 33(2)(b), F.S., the corporation did not grown from Contribution (). CTORS:) Delete REEN .LENOR DR SUITE # 240 . 32809) Delete DTHA	pent not receive the prior notice. ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition
RLANDO ne above the State GNATUF accordancection Car FFICERS le: ime: ldress: ty-St-Zip: le: ime: ldress:	named entity of Florida. RE: Electro ce with s. 607.19 npaign Financir S AND DIRECT CEO (FRANCIS, KART 7200 LAKE EL ORLANDO, FL VP (GOSHOP, LECT 7200 LAKE EL	submits this statement for the nic Signature of Registered Age 33(2)(b), F.S., the corporation did nig Trust Fund Contribution (). CTORS:) Delete REEN LLENOR DR SUITE # 240 32809) Delete DTHA LLENOR DR SUITE # 240	pent not receive the prior notice. ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition
RLANDO ne above the State GNATUF accordancection Car FFICERS le: ume: dress: ty-St-Zip: le: ume: dress: ty-St-Zip:	named entity of Florida. RE: Electro ce with s. 607.11 npaign Financir S AND DIRECT CEO (FRANCIS, KAF 7200 LAKE EL ORLANDO, FL VP (GOSHOP, LEC 7200 LAKE EL ORLANDO, FL	submits this statement for the nic Signature of Registered Age 3(2)(b), F.S., the corporation did nig Trust Fund Contribution (). CTORS:) Delete REEN LENOR DR SUITE # 240 . 32809) Delete DTHA LENOR DR SUITE # 240 . 32809	pent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition
RLANDO ne above the State GNATUF accordancection Car FFICERS le: le: ldress: ty-St-Zip: le: ldress: ty-St-Zip: le: ldress: ty-St-Zip:	named entity of Florida. RE: Electro ce with s. 607.15 npaign Financir S AND DIREC CEO (FRANCIS, KAF 7200 LAKE EL ORLANDO, FL VP (GOSHOP, LEC 7200 LAKE EL ORLANDO, FL	submits this statement for the nic Signature of Registered Age 33(2)(b), F.S., the corporation did nig Trust Fund Contribution (). CTORS:) Delete REEN LENOR DR SUITE # 240 32809) Delete DTHA LENOR DR SUITE # 240 32809) Delete OTHA DELET BY SUITE # 240 32809) Delete	pent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Title: Name: Title: Title: Title: Title: Title: Title: Title: Title: Title:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition
RLANDO ne above the State GNATUF accordancection Car FFICERS le: ldress: ty-St-Zip: le: ldress: ty-St-Zip: le: ldress:	named entity of Florida. RE: Electro ce with s. 607.11 npaign Financir S AND DIREC CEO (FRANCIS, KAR 7200 LAKE EL ORLANDO, FL VP (GOSHOP, LEC 7200 LAKE EL ORLANDO, FL VP (FRANCIS, JON	submits this statement for the nic Signature of Registered Age 3(2)(b), F.S., the corporation did nig Trust Fund Contribution (). CTORS:) Delete REEN LENOR DR SUITE # 240 . 32809) Delete DTHA LLENOR DR SUITE # 240 . 32809) Delete	pent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition
RLANDO ne above the State GNATUF accordancection Car FFICERS le: le: ldress: ty-St-Zip: le: ldress: ty-St-Zip: le: ldress: ty-St-Zip:	named entity of Florida. RE: Electro ce with s. 607.11 npaign Financir S AND DIREC CEO (FRANCIS, KAR 7200 LAKE EL ORLANDO, FL VP (GOSHOP, LEC 7200 LAKE EL ORLANDO, FL VP (FRANCIS, JON	submits this statement for the nic Signature of Registered Age 3(2)(b), F.S., the corporation did not rust Fund Contribution (). CTORS:) Delete REEN LENOR DR SUITE # 240 . 32809) Delete DIHA LENOR DR SUITE # 240 . 32809) Delete CLENOR DR SUITE # 240 . 100	pent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Title: Name: Title: Title: Title: Title: Title: Title: Title: Title: Title:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition () 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: LEOTHA GOSHOP VP 05/01/2009