2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000042484

Entity Name: DENNIS HOME CARE SERVICES, INC.

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5301 CONROY ROAD, SUITE 140 287 NEW MEXICO LANE ORLANDO, FL 32811

WESTRIDGE

DAVENPORT, FL 33837

Current Mailing Address: New Mailing Address:

5301 CONROY ROAD, SUITE 140 287 NEW MEXICO LANE WESTRIDGE ORLANDO, FL 32811

DAVENPORT, FL 33837

FEI Number: 56-2403387 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:

LAVIGNE, JAMES R ESQ OWNER ACCOUNTING SERVICES INC 5301 CONROY ROAD, SUITE 140 43350 US HIGHWAY 27

ORLANDO, FL 32811 SUITE A10 DAVENPORT, FL 33837 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: STEPHEN HARTER 04/29/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

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

DENNIS, STEPHEN DENNIS, STEPHEN MR Name: Name:

33 ELSTREE GARDENS 287 NEW MEXICO LANE, WESTRIDGE Address: Address:

DAVENPORT, FL 33837 US City-St-Zip: BELVEDERE, KENT UNITED KING, OC City-St-Zip:

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

DENNIS, LISA A DENNIS, LISA A MRS Name: Name:

33 ELSTREE GARDENS 287 NEW MEXICO LANE, WESTRIDGE Address: Address:

BELVEDERE, KENT UNITED KINGD, OC DAVENPORT, FL 33837 US 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.

SIGNATURE: STEHEN DENNIS MR 04/29/2004