

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000089913

Entity Name: K & H HEALTHKARE, INC.

FILED  
Feb 27, 2006  
Secretary of State

## Current Principal Place of Business:

5989 APPROACH ROAD  
SARASOTA, FL 34238 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 788  
BRADENTON, FL 34206 US

## New Mailing Address:

5989 APPROACH ROAD  
SARASOTA, FL 34238 US

FEI Number: 20-0165850

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COOK, TODD  
5989 APPROACH ROAD  
SARASOTA, FL 34238 US

## Name and Address of New Registered Agent:

STEELE, DEWEY E  
5989 APPROACH ROAD  
SARASOTA, FL 34238 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: DEWEY E STEELE

02/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HUBBARD, HELENE R  
Address: 4717 10TH STREET EAST  
City-St-Zip: BRADENTON, FL 342032622 US

Title: DVP ( ) Delete  
Name: MACDOUGALL, KAREN D  
Address: 6186 9TH AVENUE CIRCLE NE  
City-St-Zip: BRADENTON, FL 342129559 US

Title: DS ( ) Delete  
Name: HUBBARD, LOUIS L  
Address: 4717 10TH STREET EAST  
City-St-Zip: BRADENTON, FL 342032622 US

Title: DT ( ) Delete  
Name: MACDOUGALL, ROBERT B  
Address: 6186 9TH AVENUE CIRCLE NE  
City-St-Zip: BRADENTON, FL 342129559 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: HUBBARD, HELENE R  
Address: 4717 10TH STREET EAST  
City-St-Zip: BRADENTON, FL 342032622 US

Title: VP (X) Change ( ) Addition  
Name: MACDOUGALL, KAREN D  
Address: 6186 9TH AVENUE CIRCLE NE  
City-St-Zip: BRADENTON, FL 342129559 US

Title: DX (X) Change ( ) Addition  
Name: HUBBARD, LOUIS L  
Address: 4717 10TH STREET EAST  
City-St-Zip: BRADENTON, FL 342032622 US

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: KAREN MACDOUGALL

VP

02/27/2006

Electronic Signature of Signing Officer or Director

Date