


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 24, 2004 8:00 am**  
**Secretary of State**

09-24-2004 90002 014 \*\*\*150.00

<b>DOCUMENT # P03000112333</b> 1. Entity Name HOME CALLS PLUS, CORP.			
Principal Place of Business 207 SE 30 TERRACE NAPLES, FL 33904		Mailing Address 207 SE 30 TERRACE NAPLES, FL 33904	
2. Principal Place of Business 207 SE 30th Terrace Suite, Apt. #, etc.		3. Mailing Address 207 SE 30th Terrace Suite, Apt. #, etc.	
City & State Cape Coral FL Zip 33904 Country USA		City & State Cape Coral, FL 33904 Zip 33904 Country USA	
4. FEI Number 56-2404487		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		09212004 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent  NAPLES-LAWDOCK, INC. 1395 PANTHER LANE #300 NAPLES, FL 34109		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>FILE NOW!!! - FEE IS \$150.00</b> <b>Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
	President Joseph R. Russo		
	1742 Winding Oaks Way Naples Florida 34109		
	Vice President Jason J. Lane		
	207 SE 30th Terrace Cape Coral FL 33904		
	Secretary/Treasurer Hollie E. Lane		
	207 SE 30th Terrace Cape Coral, FL 33904		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
<b>SIGNATURE:</b> <i>Joseph R. Russo</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			