2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 25, 2008 08:00 AM Secretary of State **DOCUMENT # P04000024442** 1. Entity Name INTERIM LTC SERVICES, INC. Principal Place of Business Mailing Address 4213 RACCOON LOOP 4213 RACCOON LOOP NEW PORT RICHEY, FL 34653 NEW PORT RICHEY, FL 34653 04212008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0688357 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. DO NOT WRITE 1840 SW 22ND ST. 4TH FLOOR IN THIS SPACE MIAMI, FL 33145 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. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE TAYLOR, FREDERICK A JR NAME 4213 RACCOON LOOP STREET ADDRESS NEW PORT RICHEY, FL 34653 CITY-ST-7IP TITLE NAME TAYLOR, PATRICIA C STREET ADDRESS 4213 RACCOON LOOP CITY-ST-ZIP NEW PORT RICHEY, FL 34653 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME - STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. TAYLOR, JR.

4/17/08 727.376.024

FILED