

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040117

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** AT HOME COMPANION OF FLORIDA, INC.

**Current Principal Place of Business:**

968 EAST OSCEOLA PARKWAY  
KISSIMMEE, FL 34744 US

**New Principal Place of Business:**

**Current Mailing Address:**

968 EAST OSCEOLA PARKWAY  
SUITE 204  
KISSIMMEE, FL 34744 US

**New Mailing Address:**

**FEI Number:** 20-0828472      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ARANETA, LUIS M  
14731 GRAND COVE DRIVE  
ORLANDO, FL 32837 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ARANETA, LUIS M  
**Address:** 14731 GRAND COVE DRIVE  
**City-St-Zip:** ORLANDO, FL 32837

**Title:** VP  
**Name:** VALLE, FRANK  
**Address:** 2014 LIVE OAK BLVD  
**City-St-Zip:** ST. CLOUD, FL 34771

**Title:** S  
**Name:** MARASIGAN, REMEDIOS  
**Address:** 14823 TWIN MAPLE ST  
**City-St-Zip:** HOUSTON, TX 77082

**Title:** T  
**Name:** BAQUIRAN, DANILO  
**Address:** 6914 WEDGEWOOD AVE  
**City-St-Zip:** DAVIE, FL 33331

I hereby 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 all other like empowered.

SIGNATURE: LUIS ARANETA

PRES

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date