

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000103557

FILED
Apr 22, 2010
Secretary of State

Entity Name: MACADAMS HOME HEALTH AGENCY INC.

Current Principal Place of Business:

350 CAMINO GARDENS BLVD SUITE 104
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

350 CAMINO GARDENS BLVD SUITE 104
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 04-3794486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKO, DAVID E ESQ.
C/O 3001 SW THIRD AVENUE
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

CHITOFF, SCOTT P ESQ.
C/O 200 E. LAS OLAS BLVD.
19TH FLOOR
FORT LAUDERDALE, FL 33301 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: SCOTT P. CHITOFF

04/22/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: WHARTON, ERNEST
Address: 350 CAMINO GARDENS BLVD SUITE 104
City-St-Zip: BOCA RATON, FL 33432

Title: VPST
Name: ESTEVEZ, MARIA
Address: 350 CAMINO GARDENS BLVD SUITE 104
City-St-Zip: BOCA RATON, FL 33432

Title: VP
Name: ANGUS, IVOR
Address: 9639 ENCLAVE CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VP
Name: MCBEAN, DESIREE
Address: 8057 LINKS WAY
City-St-Zip: PORT ST. LUCIE, FL 34986

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: ERNEST WHARTON

P

04/22/2010

Electronic Signature of Signing Officer or Director

Date