

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000125487

FILED
Jun 22, 2005
Secretary of State**Entity Name:** CAPRI HOME CARE-HERNANDO, INC.**Current Principal Place of Business:**28050 US 19 N.
SUITE 202
CLEARWATER, FL 33761**New Principal Place of Business:****Current Mailing Address:**28050 US 19 N
SUITE 202
CLEARWATER, FL 33761**New Mailing Address:****FEI Number:** 55-0880914**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US**Name and Address of New Registered Agent:**DECAMELLA, DAVID
4845 DEER LODGE ROAD
NEW PORT RICHEY, FL 34655 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: DAVID DECAMELLA

06/22/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: DECAMELLA, GENA
Address: 4845 DEER LODGE RD
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DPS () Delete
Name: DECAMELLA, DAVID
Address: 4845 DEER LODGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 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: DAVID DECAMELLA

OWNE

06/22/2005

Electronic Signature of Signing Officer or Director

Date