2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# P04000125487

Entity Name: CAPRI HOME CARE-HERNANDO, INC.

Current Principal Place of Business:

13105 SPRING HILL DRIVE
SPRING HILL, FL 34609

New Principal Place of Business:

Current Mailing Address:

28050 US 19 N
SUITE 202
CLEARWATER, FL 33761

New Mailing Address:

3023 EASTLAND BLVD
SUITE 103
CLEARWATER, FL 33761

FEI Number: 55-0880914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DECAMELLA, DAVID
4845 DEER LODGE ROAD
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

DECAMELLA, DAVID
1211 PLAYMOOR DRIVE
PALM HARBOR, FL 34683 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: 01/19/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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: DPS (X) Change ( ) Addition
Name: DECAMELLA, GENA
Address: 1211 PLAYMOOR DRIVE
City-St-Zip: PALM HARBOR, FL 34683

Title: DPS (X) Change ( ) Addition
Name: DECAMELLA, DAVID
Address: 1211 PLAYMOOR DRIVE
City-St-Zip: PALM HARBOR, FL 34683

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 MGR 01/19/2009
Electronic Signature of Signing Officer or Director Date