2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000133599

Entity Name: PREFERRED HOME CARE SERVICES, INC.

FILED May 16, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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8359 BEACON BLVD., STE 112 FORT MYERS, FL 33907 US

Current Mailing Address: New Mailing Address:

8359 BEACON BLVD., STE 112 FORT MYERS, FL 33907 US

FEI Number: 20-1666325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HORINEK, MELISSA

8359 BEACON BLVD., STE 112
FORT MYERS, FL 33907 US

MCMILLION, DENNIS W DIR
8359 BEACON BLVD., STE 112
FORT MYERS, FL 33907 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: DENNIS MCMILLION 05/16/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: DIR (X) Change () Addition

 Name:
 HORINEK, MELISSA
 Name:
 MCMILLION, DENNIS W

 Address:
 13280 CORBEL CIRCLE #1912
 Address:
 2412 LAUDERDALE CT

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:
 ORLANDO, FL 32805

Title: VP (X) Delete Title: () Change () Addition

 Name:
 HORINEK, STEVEN
 Name:

 Address:
 13280 CORBEL CIRCLE #1912
 Address:

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:

Title: () Delete Title: DIR () Change (X) Addition

 Name:
 Name:
 MCMILLION, VANESSA N

 Address:
 Address:
 2412 LAUDERDALE CT

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32805

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: DENNIS MCMILLION DIR 05/16/2007