2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

DOCUMENT# P05000012998

Entity Name: AT HOME HEALTH CARE OF FT. PIERCE, INC.

Current Principal Place of Business:

1401 S.E.GOLDTREE DR,
SUITE 102
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

7400 US HIGHWAY 1
VERO BEACH, FL 32967

Current Mailing Address:

1401 S.E.GOLDTREE DR,
SUITE 102
PORT ST. LUCIE, FL 34952

New Mailing Address:

7400 US HIGHWAY !
VERO BEACH, FL 32967

FEI Number: 37-1503665 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ACHARYA, NAVIN
2010 NE 45TH ST
FORT LAUDERDALE, FL 33308 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: D
Name: ACHARYA, NAVIN
Address: 2010 NE 45TH ST
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D
Name: DOSHI, SUDHA
Address: 2010 N.E.45TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

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: NAVIN ACHARYA D 04/20/2011

Electronic Signature of Signing Officer or Director Date