

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000014833

FILED
Sep 11, 2006
Secretary of State

Entity Name: NEVER ALONE HOME CARE, INC.

Current Principal Place of Business:

801 INTERNATIONAL PARKWAY
5TH FLOOR
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

1480 TRAVERTINE TERRACE
SANFORD, FL 32771

New Mailing Address:

1075 WYNN STREET
SANFORD, FL 32773

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, VERA F
1480 TRAVERTINE TERRACE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

CLARK, VERA F
1075 WYNN STREET
SANFORD, FL 32773 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:

09/11/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MCCOOL, DENNIS L
Address: 1480 TRAVERTINE TERRACE
City-St-Zip: SANFORD, FL 32771

Title: PRES () Delete
Name: CLARK, VERA F
Address: 197 WIMBLEDON CIR
City-St-Zip: LAKE MARY, FL 32746

Title: S/TR () Delete
Name: MCCOOL, DENNIS L
Address: 1480 TRAVERTINE TERRACE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: CLARK, VERA F
Address: 1075 WYNN STREET
City-St-Zip: SANFORD, FL 32773

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

Title: S/TR (X) Change () Addition
Name: CLARK, VERA F
Address: 1075 WYNN STREET
City-St-Zip: SANFORD, FL 32773

I hereby certify that the information supplied with this filing does not qualify for the 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: VERA F. CLARK

PRES

09/11/2006

Electronic Signature of Signing Officer or Director

Date