

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015173

FILED
Apr 18, 2006
Secretary of State

Entity Name: ROLAND HEALTH CARE SYSTEMS .INC

Current Principal Place of Business:

5756 S. SEMORAN BLVD.
BUILDING E
ORLANDO, FL 32822 US

New Principal Place of Business:

36 S FIFTH STREET
HAINES CITY, FL 33844 US

Current Mailing Address:

258 OAKHURST CIR
KISSIMMEE, FL 34744 US

New Mailing Address:

FEI Number: 81-0663077 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, JAMES C
258 OAKHURST CIR
KISSIMMEE, FL 34744 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CO () Delete
Name: MOORE, JAMES C
Address: 258 OAKHURST CIRCLE
City-St-Zip: KISSIMMEE, FL 34744 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: MOORE, JAMES C
Address: 258 OAKHURST CIRCLE
City-St-Zip: KISSIMMEE, FL 34744 US

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: JAMES C. MOORE

CEO

04/18/2006

Electronic Signature of Signing Officer or Director

Date