

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000048669

**FILED**  
**Mar 10, 2008**  
**Secretary of State**

**Entity Name:** SHIRLEY'S PERSONAL CARE SERVICES OF OKEECHOBEE, INC.

**Current Principal Place of Business:**

320 NW 5TH STREET  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

316 NW 5TH STREET  
OKEECHOBEE, FL 34972

**Current Mailing Address:**

320 NW 5TH STREET  
OKEECHOBEE, FL 34972

**New Mailing Address:**

316 NW 5TH STREET  
OKEECHOBEE, FL 34972

**FEI Number:** 20-3039985

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAKER, SHIRLEY  
320 NW 5TH STREET  
OKEECHOBEE, FL 34972 US

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

BAKER, SHIRLEY  
316 NW 5TH STREET  
OKEECHOBEE, FL 34972 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: \_\_\_\_\_

03/10/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BAKER, SHIRLEY  
Address: 320 NW 5TH STREET  
City-St-Zip: OKEECHOBEE, FL 34972

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: BAKER, SHIRLEY  
Address: 316 NW 5TH STREET  
City-St-Zip: OKEECHOBEE, FL 34972

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: SHIRLEY BAKER

D

03/10/2008

Electronic Signature of Signing Officer or Director

Date