## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000058417

OCALA, FL 34480 US

City-St-Zip:

Entity Name: COUNTRYSIDE HOUSECALLS, INC

FILED Apr 24, 2008 Secretary of State

Littly Na	IIIE. COUNTRISIDE HOUSECALLS, II	NC.		
Current P	rincipal Place of Business:	New Principal Place of Business:	New Principal Place of Business:	
1220 S.E. OCALA, F	95TH STREET L 34480 US			
Current N	lailing Address:	New Mailing Address:		
1220 S.E. OCALA, F	95TH STREET L 34480 US			
FEI Number	: FEI Number Applied For (	) FEI Number Not Applicable (X) Certificate of Status Desired (	.)	
Name and Address of Current Registered Agent:		t: Name and Address of New Registered Agent:		
	OUGLAS P 95TH STREET L 34480 US			
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or	both,	
SIGNATUI	RE:			
	Electronic Signature of Registere	d Agent Date		
Election Ca	mpaign Financing Trust Fund Contribution (			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	P () Delete NAGLE, TERESA K 1220 S.E. 95TH STREET OCALA, FL 34480 US	Title: P (X) Change ( ) Addition Name: NAGLE, DOUGLAS P Address: 1220 S.E. 95TH STREET City-St-Zip: OCALA, FL 34480 US		
Title: Name: Address: City-St-Zip:	VP. () Delete NAGLE, DOUGLAS P 1220 S.E. 95TH STREET OCALA, FL 34480 US	Title: VP. (X) Change ( ) Addition Name: NAGLE, KAYE S Address: 1220 S.E. 95TH STREET City-St-Zip: OCALA, FL 34480 US		
Title: Name: Address: City-St-Zip:	S () Delete NAGLE, DOUGLAS P 1220 S.E. 95TH STREET OCALA, FL 34480 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:		
Title: Name: Address:	T () Delete NAGLE, DOUGLAS P 1220 S.E. 95TH STREET	Title: ( ) Change ( ) Addition Name: Address:		

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.

City-St-Zip:

SIGNATURE: DOUGLAS P. NAGLE P 04/24/2008