

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000081270

FILED
Apr 27, 2006
Secretary of State

Entity Name: WELCOME HOMECARE SERVICES, INC.

Current Principal Place of Business:

9570 REGENCY SQUARE BLVD.
JACKSONVILLE, FL 32225

New Principal Place of Business:

9570 REGENCY SQUARE BLVD
JACKSONVILLE, FL 32225

Current Mailing Address:

9570 REGENCY SQUARE BLVD.
JACKSONVILLE, FL 32225

New Mailing Address:

9570 REGENCY SQUARE BLVD
JACKSONVILLE, FL 32225

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARINUCCI, ANTHONY F.
9570 REGENCY SQUARE BLVD.
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

MARINUCCI, ANTHONY F
9570 REGENCY SQUARE BLVD
JACKSONVILLE, FL 32225 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: ANTHONY F. MARINUCCI

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GYLAND, STEPHEN P. MD
Address: 3366 ROYAL PALM DR.
City-St-Zip: JACKSONVILLE, FL 32250

Title: D () Delete
Name: MODLIN, MARIKA ST
Address: 3750 MISTY WOOD DR.
City-St-Zip: MARIETTA, GA 30064

Title: D () Delete
Name: STREMMEL, MARLA
Address: 1028 ARCARO CT.
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: TROUTT, JOI
Address: 908 BECKINGHAM DR.
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D (X) Delete
Name: WILSON, KEVIN
Address: 12626 SHADY CREEK DR.
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GYLAND, STEPHEN P MD
Address: 3366 ROYAL PALM DRIVE
City-St-Zip: JACKSONVILLE, FL 32250

Title: D (X) Change () Addition
Name: MODLIN, MARIKA
Address: 3750 MISTY WOOD DRIVE
City-St-Zip: MARIETTA, GA 30064

Title: D (X) Change () Addition
Name: STREMMEL, CYNTHIA M
Address: 1028 ARCARO COURT
City-St-Zip: JACKSONVILLE, FL 32218

Title: D (X) Change () Addition
Name: TROUTT, JOI
Address: 908 BECKINGHAM DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

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

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: ANTHONY F. MARINUCCI

AGNT

04/27/2006

Electronic Signature of Signing Officer or Director

Date