2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# P05000084431

Entity Name: CONDOCARE OF PALM COAST, INC.

Current Principal Place of Business:

1100 CANOPY WALK LANE
1123
PALM COAST, FL 32137

New Principal Place of Business:

1000 CANOPY WALK LANE
1021
PALM COAST, FL 32137

Current Mailing Address:

1100 CANOPY WALK LANE
1123
PALM COAST, FL 32137

New Mailing Address:

1000 CANOPY WALK LANE
1021
PALM COAST, FL 32137

FEI Number: 56-2520278 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAMPTON, JILL K
1100 CANOPY WALK LANE
1123
PALM COAST, FL, FL 32137 US

Name and Address of New Registered Agent:

HAMPTON, JILL K
1000 CANOPY WALK LANE
1021
PALM COAST, FL, FL 32137 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: JILL K. HAMPTON 01/08/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HAMPTON, JILL K
Address: 1100 CANOPY WALK LANE, #1123
City-St-Zip: PALM COAST, FL 32137 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HAMPTON, JILL K
Address: 1000 CANOPY WALK LANE, #1021
City-St-Zip: PALM COAST, FL 32137 US

Title: TD ( ) Change (X) Addition
Name: LINDEN-COX, DEAN M
Address: 1000 CANOPY WALK LANE - #1021
City-St-Zip: PALM COAST, FL 32137 US

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: JILL K. HAMPTON P 01/08/2008
Electronic Signature of Signing Officer or Director Date