

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000030512

FILED
May 05, 2008
Secretary of State

Entity Name: GLOBAL CARE PROVIDER SERVICES, INC.

Current Principal Place of Business:

600 W. OAKRIDGE RD
SUITE E
ORLANDO, FL 32809

New Principal Place of Business:

609 GLEN GROVE LN
ORLANDO, FL 32839

Current Mailing Address:

600 W. OAKRIDGE RD
SUITE E
ORLANDO, FL 32809

New Mailing Address:

P.O BOX 593377
ORLANDO, FL 32859

FEI Number: 01-0875175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDMOND, ZACHARIE
600 W. OAK RIDGE RD.
SUITE E
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

EDMOND, ZACHARIE
609 GLEN GROVE LN
ORLANDO, FL 32839 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: ZACHARIE EDMOND

05/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EDMOND, ZACHARIE
Address: 600 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: EDMOND, ANGE
Address: 600 W. OAK RIDGE RD.
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EDMOND, ZACHARIE
Address: 609 GLEN GROVE LN
City-St-Zip: ORLANDO, FL 32839

Title: D (X) Change () Addition
Name: EDMOND, ANGE
Address: 609 GLEN GROVE LN
City-St-Zip: ORLANDO, FL 32839

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: ZACHARIE EDMOND

CEO

05/05/2008

Electronic Signature of Signing Officer or Director

Date