2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000086165

Entity Name: PALM BEACH HOME HEALTH CARE, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
1489 N. MILITARY TRAIL SUITE 207 WEST PALM BEACH, FL 33409 US	718 SW PORT ST. LUCIE BLVD., #2 PORT ST. LUCIE, FL 34953 US

Current Mailing Address:	**New Mailing Address:**
1489 N. MILITARY TRAIL SUITE 207 WEST PALM BEACH, FL 33409 US	6801 LAKE WORTH ROAD S. BLDG., SUITE 100 GREENACRES, FL 33467 US

FEI Number: 20-5132485   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
LIGETI, MICHAEL T 1489 N. MILITARY TRAIL SUITE 207 WEST PALM BEACH, FL 33409 US	LIGETI, MICHAEL T 6801 LAKE WORTH ROAD S. BLDG., SUITE 100 GREENACRES, FL 33467 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: MICHAEL T. LIGETI   02/17/2011

           Electronic Signature of Registered Agent   Date

OFFICERS AND DIRECTORS:

Title: P
Name: LIGETI, MICHAEL T
Address: 240 SULKY WAY
City-St-Zip: WELLINGTON, FL 33414 US

Title: VP
Name: LIGETI, ELIZABETH A
Address: 14643 HORSESHOE TRACE
City-St-Zip: WELLINGTON, FL 33414 US

Title: TR
Name: LIGETI, MICHAEL T
Address: 240 SULKY WAY
City-St-Zip: WELLINGTON, FL 33414 US

Title: SEC
Name: LIGETI, ELIZABETH A
Address: 14643 HORSESHOE TRACE
City-St-Zip: WELLINGTON, FL 33414 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL T. LIGETI   PRES   02/17/2011

           Electronic Signature of Signing Officer or Director   Date