

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000014132

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** TENDER LOVING CARE SERVICES, CORP.

**Current Principal Place of Business:**

114 JOANN ST.  
PERRY, FL 32348

**New Principal Place of Business:**

115 WEST GREEN STREET,  
SUITE 204  
PERRY, FL 32347

**Current Mailing Address:**

114 JOANN ST.  
PERRY, FL 32348

**New Mailing Address:**

115 WEST GREEN STREET,  
SUITE 204  
PERRY, FL 32347

**FEI Number:** 01-0892683

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JONES, STACI  
114 JOANN ST.  
PERRY, FL 32348 US

**Name and Address of New Registered Agent:**

RICHARDSON, STACI  
115 WEST GREEN STREET  
SUITE 204  
PERRY, FL 32348 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: STACI RICHARDSON

04/30/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: JONES, STACI  
Address: 114 JOANN ST.  
City-St-Zip: PERRY, FL 32348

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: RICHARDSON, STACI  
Address: 115 WEST GREEN STREET SUITE, 204  
City-St-Zip: PERRY, FL 32347

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: STACI RICHARDSON

MRS

04/30/2009

Electronic Signature of Signing Officer or Director

Date