2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# P07000099691

Entity Name: COMPASSION HOME CARE SERVICES, CORP.

Current Principal Place of Business:

2101 SHANNON LAKES BLVD
KISSIMMEE, FL 34743

New Principal Place of Business:

7200 LAKE ELLENOR DRIVE
118
ORLANDO, FL 32809

Current Mailing Address:

2101 SHANNON LAKES BLVD
KISSIMMEE, FL 34743

New Mailing Address:

7200 LAKE ELLENOR DRIVE
118
ORLANDO, FL 32809

FEI Number: 26-1073959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOSEPH, GUERLINE
2101 SHANNON LAKES BLVD
KISSIMMEE, FL 34743 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: JOSEPH, GUERLINE
Address: 2101 SHANNON LAKES BLVD
City-St-Zip: KISSIMMEE, FL 34743

Title: P ( ) Delete
Name: JOSEPH, GUERLINE
Address: 2101 SHANNON LAKES BLVD
City-St-Zip: KISSIMMEE, FL 34743

Title: VP ( ) Delete
Name: JOSEPH, ERICK
Address: 2101 SHANNON LAKES BLVD
City-St-Zip: KISSIMMEE, FL 34743

Title: CFO ( ) Delete
Name: JOSEPH, ERICK
Address: 2101 SHANNON LAKES BLVD
City-St-Zip: KISSIMMEE, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ERICK JOSEPH VP 04/11/2008

Electronic Signature of Signing Officer or Director — Date