

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000117640

FILED
Apr 30, 2008
Secretary of State

Entity Name: CARING HANDS NURSING REGISTRY, INC

Current Principal Place of Business:

3867 TURTLE RUN BLVD.
2323
CORAL SPRINGS, FL 33067

Current Mailing Address:

3867 TURTLE RUN BLVD.
2323
CORAL SPRINGS, FL 33067

New Principal Place of Business:

3867 TURTLE RUN BLVD.
2323
CORAL SPRINGS, FL 33067 US

New Mailing Address:

3867 TURTLE RUN BLVD.
2323
CORAL SPRINGS, FL 33067 US

FEI Number: 26-1326498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REID'S INCOME TAX & COMPUTER SERVICE, LLC
5419 NORTH STATE ROAD 7
TAMARAC, FL 33319 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: P () Delete
Name: OLDFIELD, EVERALD
Address: 3867 TURTLE RUN BLVD. APT. 2323
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: EVERALD OLDFIELD

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date