

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000119673

FILED  
Jan 13, 2010  
Secretary of State

**Entity Name:** SPECIAL CARE PROVIDERS OF PLANTATION, INC.

**Current Principal Place of Business:**

401 NW 42ND AVENUE  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

201 EAST SAMPLE ROAD  
7TH FLOOR SPECIAL CARE UNIT  
POMPANO BEACH, FL 33064

**New Mailing Address:**

**FEI Number:** 33-1187905

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COREN, RICHARD A  
7346 SEDONA WAY  
DELRAY BEACH, FL 33446 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  
Name: PAGE, PAUL J  
Address: 2373 SW 132ND WAY  
City-St-Zip: DAVIE, FL 33325

Title: ST  
Name: COREN, RICHARD A  
Address: 7346 SEDONA WAY  
City-St-Zip: DELRAY BEACH, FL 33446

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: PAUL PAGE

P

01/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date