

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000052845

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** CERTIFIED HOMECARE MANAGEMENT INC

**Current Principal Place of Business:**

350 CAMINO GARDENS BLVD  
104  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

350 CAMINO GARDENS BLVD  
104  
BOCA RATON, FL 33432

**New Mailing Address:**

**FEI Number:** 26-4235368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEIBLOOM FINANCIAL SERVICES CORPORATION  
265 S FEDERAL HIGHWAY  
L  
DANIA BEACH, FL 33004 US

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

WHARTON, JENNIFER J ESQ  
3107 STIRLING ROAD  
SUITE 205  
FORT LAUDERDALE, FL 33312 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: JENNIFER WHARTON

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WHARTON, ERNEST B  
Address: 350 CAMINO GARDENS BLVD SUITE 104  
City-St-Zip: BOCA RATON, FL 33432 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: ERNEST WHARTON

P

04/30/2012

Electronic Signature of Signing Officer or Director

Date