

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 07, 2009
Secretary of State**

DOCUMENT# P08000091861

Entity Name: ELITECARE CONCEPTS P.C., PA

Current Principal Place of Business:

2816 STEARNS ROAD
VALRICO, FL 33596

New Principal Place of Business:

Current Mailing Address:

2816 STEARNS ROAD
VALRICO, FL 33596

New Mailing Address:

P.O BOX 21263
TAMPA, FL 33622

FEI Number: 38-3790714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSTON, VIRGINA
2816 STEARNS ROAD
VALRICO, FL 33596 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MARSTON, VIRGINA
Address: 2816 STEARNS ROAD
City-St-Zip: VALRICO, FL 33596

Title: SEC () Delete
Name: HARRIS, ANN-MARIE
Address: 25700 SANTOS WAY
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: TREA () Delete
Name: HARRIS, ANNE-MARIE
Address: 25700 SANTOS WAY
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V.P (X) Change () Addition
Name: HARRIS, ANN-MARIE
Address: 25700 SANTOS WAY
City-St-Zip: WESLEY CHAPEL, FL 33544

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

Title: SEC () Change (X) Addition
Name: HARRIS, ANN-MARIE S
Address: 25700 SANTOS WAY
City-St-Zip: WESLEY CHAPEL, FL 33544

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: ANN-MARIE HARRIS

VP

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date