

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000077544

FILED
Mar 09, 2012
Secretary of State

Entity Name: PINNACLE HOME CARE OF THE VILLAGES, INC.

Current Principal Place of Business:

1217 WEST MILLER ST
UNIT 6
FRUITLAND PARK, FL 34731

New Principal Place of Business:

Current Mailing Address:

4821 US HIGHWAY 19
SUITE 2
NEW PORT RICHEY, FL 34652

New Mailing Address:

1217 WEST MILLER ST
UNIT 6
FRUITLAND PARK, FL 34731

FEI Number: 27-1477157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONALDSON, SHANE
4556 GRAND LAKESIDE DRIVE
PALM HARBOR, FL 34684 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: PD
Name: DONALDSON, SHANE
Address: 4556 GRAND LAKESIDE DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: VD
Name: PAGE, RACHAEL
Address: 4556 GRAND LAKESIDE DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: TD
Name: YURASKO, KELLY
Address: 423 HWY 466, APT 3105
City-St-Zip: LADY LAKE, FL 32159

Title: VD
Name: YURASKO, ANDREW
Address: 423 HWY 466, APT 3105
City-St-Zip: LADY LAKE, FL 32159

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: SHANE DONALDSON

PD

03/09/2012

Electronic Signature of Signing Officer or Director

Date