2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2011
Secretary of State

DOCUMENT# P09000089223

Entity Name: FIRST QUALITY HOME HEALTH SERVICES INC

Current Principal Place of Business:

1300 NW 17TH AVENUE, SUITE 278
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

PO BOX 7300
DELRAY BEACH, FL 334827300

New Mailing Address:

FEI Number: 90-0524561 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOMLINSON, ERROL
1300 NW 17TH AVENUE, SUITE 278
DELRAY BEACH, FL 33445 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: DCEO
Name: TOMLINSON, ERROL
Address: 4285 CASCADE ROAD
City-St-Zip: ATLANTA, GA 30331

Title: PST
Name: TOMLINSON, ERROL
Address: 4285 CASCADE ROAD
City-St-Zip: ATLANTA, GA 30331

Title: CFO
Name: TOMLINSON, ERROL
Address: 4285 CASCADE ROAD
City-St-Zip: ATLANTA, GA 30331

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: ERROL TOMLINSON CEO 04/06/2011

Electronic Signature of Signing Officer or Director Date