

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000026668

FILED
Apr 25, 2005
Secretary of State

Entity Name: DANA'S HOUSEKEEPING PERSONNEL SERVICE #2, INC.

Current Principal Place of Business:

3500 N STATE ROAD 7
STE 100 B
LAUDERDALE LAKES, FL 33319 US

New Principal Place of Business:

3500 N STATE ROAD 7
STE 100 C
LAUDERDALE LAKES, FL 33319 US

Current Mailing Address:

1009 N. PINE HILLS ROAD
ORLANDO, FL 32808 US

New Mailing Address:

FEI Number: 65-0655703 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICES OF STVEN M. FAHLGREN, P.A.
4751 SOUTH CONWAY ROAD
ORLANDO, FL 32812 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 () Delete
Name: GOODMAN, LESLIE R
Address: 5174 SIGNAL HILL ROAD
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: LAMP, PATRICIA L
Address: 266 OXALIS DRIVE
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOODMAN, LESLIE R
Address: 1009 N PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808

Title: S (X) Change () Addition
Name: LAMP, PATRICIA L
Address: 1009 N PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LESLIE GOODMAN

P

04/25/2005

Electronic Signature of Signing Officer or Director

Date