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Corporation	on Name F3000	0100218			SECRETARY OF STATE
EXTEND	ED FAMILY HOME CARE	ING.			TALLAHASSEE, FLORIDA
	- 40	Adallian Add			
vestgrill	e of Business DRIVE	Mailing Address POST OFFICE BOX 354	763		64-24-99 90285 023 \$61.1
M COAST F		PALM COAST FL 32135			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
Principal P	Place of Business	2a. Mailing Address			12/12/1996 4. FEI Number Applied For
		26			59-3414199 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	le	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country	Zip	30 Co.	intry	8. This corporation owes the current year Intangible Personal Property. Yes No
	9. Name and Address of Cu				10. Name and Address of New Registered Agent
1 5 5	, ELVA			81 Name	
	SCAYNE PLACE			82 Street	Address (P.O. Box Number is Not Acceptable)
PALI	M COAST FL 32137			83	
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				84 City	B5 Zip Code
	the the are laine of anti-en 607 (0503 and 607 4509. Fladde Storide	udos the ob		FL 85 Zip Code
Pursuant office or	t to the provisions of sections 607. registered agent, or both, in the S	0502 and 607.1508, Florida State of Florida. Such change we blingtions of section 607.0505	tutes, the ab		FL []
NATURE				ove-named or d by the corpo tutes.	proporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
NATURE .	Signature, typed or printed name of registered			ove-named or d by the corpo tutes.	FL []
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