

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000060484

FILED
Apr 16, 2012
Secretary of State

Entity Name: ABSENTEE HOMECARE, INC.

Current Principal Place of Business:

3624 KENT DRIVE
NAPLES, FL 34112 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1879
MARCO ISLAND, FL 34146 US

New Mailing Address:

FEI Number: 59-3524676 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FLEISCHMANN, DOUGLAS F
3624 KENT DRIVE
NAPLES, FL 34112 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: P
Name: FLEISCHMANN, DOUGLAS
Address: 3624 KENT DRIVE
City-St-Zip: NAPLES, FL 34112

Title: VP
Name: MITCHELL, INGRID
Address: 3624 KENT DRIVE
City-St-Zip: NAPLES, FL 34112

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: DOUGLAS F. FLEISCHMANN

P

04/16/2012

Electronic Signature of Signing Officer or Director

Date