

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000083198

FILED
Apr 30, 2004
Secretary of State

Entity Name: HOMESTEAD HEALTH MANAGEMENT GROUP, INC.

Current Principal Place of Business:

7235 BRYAN DAIRY ROAD
LARGO, FL 33777

New Principal Place of Business:

Current Mailing Address:

7235 BRYAN DAIRY ROAD
LARGO, FL 33777

New Mailing Address:

FEI Number: 59-3535033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEENAN, JAMES E
1235 BRYAN DAIRY ROAD
LARGO, FL 33777 US

Name and Address of New Registered Agent:

HEENAN, JAMES E
7235 BRYAN DAIRY ROAD
LARGO, FL 33777 US

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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOSES, MICHAEL J II
Address: 7235 BRYAN DAIRY ROAD
City-St-Zip: LARGO, FL 33777

Title: TD () Delete
Name: HEENAN, JAMES E
Address: 7235 BRYAN DAIRY ROAD
City-St-Zip: LARGO, FL 33777

Title: D () Delete
Name: BOSWORTH, LOIS
Address: 7235 BRYAN DAIRY ROAD
City-St-Zip: LARGO, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: BOSWORTH, LOIS
Address: 7235 BRYAN DAIRY ROAD
City-St-Zip: LARGO, FL 33777

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: JAMES E. HEENAN

TD

04/30/2004

Electronic Signature of Signing Officer or Director

Date