

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065494

FILED
Feb 24, 2011
Secretary of State

Entity Name: CLIENT CARE PROFESSIONALS, INC.

Current Principal Place of Business:

5201 S INDIAN RIVER DRIVE
FORT PIERCE, FL 34982 US

New Principal Place of Business:

2071 DIXIE BELLE DRIVE
UNIT N
ORLANDO, FL 32812 US

Current Mailing Address:

5201 S INDIAN RIVER DRIVE
FORT PIERCE, FL 34982 US

New Mailing Address:

2071 DIXIE BELLE DRIVE
UNIT N
ORLANDO, FL 32812 US

FEI Number: 65-0945426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COVEY, JUDY K MRS
5201 S INDIAN RIVER DRIVE
FT. PIERCE, FL 34982 US

Name and Address of New Registered Agent:

COVEY, JUDY K MS
2071 DIXIE BELLE DRIVE
UNIT N
ORLANDO, FL 32812 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: JUDY K COVEY

02/24/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPST
Name: COVEY, JUDY K
Address: 2071 DIXIE BELLE DRIVE, UNIT N
City-St-Zip: ORLANDO, FL 32812

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: JUDY K. COVEY

DPST

02/24/2011

Electronic Signature of Signing Officer or Director

Date