2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# S53082

Entity Name: COMMONWEALTH CONTINENTAL HEALTH CARE, INC.

Current Principal Place of Business:

13737 NOEL ROAD, SUITE 100
DALLAS, TX 75240 US

New Principal Place of Business:

Current Mailing Address:

13737 NOEL ROAD, SUITE 100
DALLAS, TX 75240 US

New Mailing Address:

FEI Number: 65-0270101 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 ( ) Delete
Name: ALEMAN, RALPH
Address: 651 EAST 25TH ST
City-St-Zip: HIALEAH, FL 33013 US

Title: S ( ) Delete
Name: MACK, KRISTINA M
Address: 13737 NOEL ROAD, SUITE 100
City-St-Zip: DALLAS, TX 75240 US

Title: T ( ) Delete
Name: SHERMAN, JEFFREY
Address: 13737 NOEL ROAD, SUITE 100
City-St-Zip: DALLAS, TX 75240 US

Title: D (X) Delete
Name: MACK, KRISTINA S
Address: 13737 NOEL ROAD, SUITE 100
City-St-Zip: DALLAS, TX 75240 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: POWERS, MARSHA D
Address: 5810 CORAL RIDGE DR., STE 300
City-St-Zip: FT. LAUDERDALE, FL 33076 US

Title: DS (X) Change ( ) Addition
Name: MACK, KRISTINA A
Address: 13737 NOEL ROAD, SUITE 100
City-St-Zip: DALLAS, TX 75240 US

Title: T (X) Change ( ) Addition
Name: SHERMAN, JEFFREY S
Address: 13737 NOEL ROAD, SUITE 100
City-St-Zip: DALLAS, TX 75240 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: KRISTINA A. MACK S 03/27/2009

Electronic Signature of Signing Officer or Director Date