

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S65671

FILED
Jan 04, 2005
Secretary of State

Entity Name: ADVANTAGE HOME ASSISTED CARE, INC.

Current Principal Place of Business:

13465 WALSINGHAM ROAD
LARGO, FL 33774 US

New Principal Place of Business:

Current Mailing Address:

13465 WALSINGHAM ROAD
LARGO, FL 33774 US

New Mailing Address:

FEI Number: 59-3110143 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FINNIS, JERRY
13264 84TH TERRACE N.
SEMINOLE, FL 33776 US

Name and Address of New Registered Agent:

FINNIN, JERRY
13264 84TH TERRACE N.
SEMINOLE, FL 33776 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: JERRY A. FINNIN

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FINNIN, JERRY
Address: 13264 84TH TERRACE N.
City-St-Zip: SEMINOLE, FL 33776

Title: VP (X) Delete
Name: FINNIN, JERRY
Address: 1712 E1 TAR TRAY1
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JERRY A. FINNIN

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date