2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S95459

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Entity Name: HOSPICE CARE, INC.

FILED Jan 17, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:			
	SEVELT BLVI ATER, FL 337						
Current M	lailing Addres	ss:	New Maili	New Mailing Address:			
	SEVELT BLVI ATER, FL 337						
FEI Number:	: 59-3115123	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desi	red ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
LABYAK, M 300 EAST LARGO, F	BAY DRIVE	5	5771 RÓO	LABYAK, MARY J 5771 ROOSEVELT BLVD CLEARWATER, FL 337603413 US			
	named entity of Florida.	submits this statement for the	ourpose of changing i	its registered o	office or registered agen	t, or both,	
SIGNATUR	RE: MARYJI	_ABYAK		01/17/2006			
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	WELCH, CLÂR 1640 27TH AVI		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	P (LABYAK, MAR` 300 EAST BAY LARGO, FL 34	DR	Title: Name: Address: City-St-Zip:	LABYAK, MAR 5771 ROOSEV			
Title: Name: Address: City-St-Zip:	D (HANCOCK, GU 10035 83RD W SEMINOLE, FL	AY NORTH	Title: Name: Address: City-St-Zip:	() Change()Addition		

Title: Title: () Delete (X) Change () Addition ETTEN, MARY JEAN, ETTEN, MARY JEAN, Name: Name: 7024 HIBISCUS AVE. SO. 7378 GRIFFIN ROAD Address: Address: ST PETERSURG, FL 33707 BROOKSVILLE, FL 34601 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

SIGNATURE: MARY J LABYAK P 01/17/2006

() Delete

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WHETSTONE, CHARLES

CLEARWATER, FL 33756

CLEARWATER, FL 33756

2111 DREW STREET

BARMORE, PATRICK

15 NO. JUPITER AVE

SD

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