2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2014
Secretary of State
CC6717616122

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Entity Name: HOME CARE BY GULF COAST VILLAGE, INC.

Current Principal Place of Business:

1333 SANTA BARBARA BLVD
CAPE CORAL, FL 33991

Current Mailing Address:

1333 SANTA BARBARA BLVD
CAPE CORAL, FL 33991

FEI Number: 26-1774290

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ESKIN, HAROLD S
1420 SE 47TH ST
CAPE CORAL, FL 33904 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	BRDM
Name	TURNBULL, THOMAS
Address	1660 DUKE STREET
City-State-Zip:	ALEXANDRIA VA 22314

Title	SCTY
Name	MOORE, CAROL
Address	635 FIRST STREET
City-State-Zip:	ALEXANDRIA VA 22314

Title	ASEC
Name	AHMADI, KEVIN
Address	1333 SANTA BARBARA BLVD
City-State-Zip:	CAPE CORAL FL 33991

Title	BRDM
Name	SMITH, NANCY
Address	1333 SANTA BARBARA BLVD
City-State-Zip:	CAPE CORAL FL 33991

Title	CHRM
Name	SPILANE, MICHAEL MD
Address	401 PHALEN BLVD
City-State-Zip:	ST. PAUL MN 55130

Title	BRDM
Name	CASH, THOMAS N
Address	8211 COLLEGE PARKWAY, SUITE 180
City-State-Zip:	FORT MYERS FL 33919

Title	BRDM
Name	PIASCIK, WENCY
Address	1333 SANTA BARBARA BLVD
City-State-Zip:	CAPE CORAL FL 33991

Title	BRDM
Name	STRINGFELLOW, JANET
Address	1333 SANTA BARBARA BLVD
City-State-Zip:	CAPE CORAL FL 33991

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEVIN AHMADI ASST. SEC. 04/14/2014

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	ASST. SECRETARY
Name	BOWMAN, DAVID
Address	1333 SANTA BARBARA BLVD
City-State-Zip:	CAPE CORAL FL 33991

Title	BRDM
Name	KING, MIKE
Address	1333 SANTA BARBARA BLVD
City-State-Zip:	CAPE CORAL FL 33991