

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000027258

FILED
Apr 04, 2013
Secretary of State
CC0814974636

Entity Name: COMPREHENSIVE HOME CARE OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

7552 NAVARRE PARKWAY,
UNIT # 4
NAVARRE, FL 32566

Current Mailing Address:

8201 POMPANO ST
NAVARRE, FL 32566 US

FEI Number: 20-8656968

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DANIEL, FRANK GJR.
8201 POMPANO ST
NAVARRE, FL 32566 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 PT
Name DANIEL, FRANK GJR.
Address 8201 POMPANO ST
City-State-Zip: NAVARRE FL 32566

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: FRANK G DANIEL

**OWNER,
ADMINISTRATOR**

04/04/2013

Electronic Signature of Signing Officer/Director Detail

Date