

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000067580

**Entity Name:** ST. MICHAEL GUARDIAN HOME CARE INC.

**Current Principal Place of Business:**

1959 CLEARVIEW LAKE DR  
CLEARWATER, FL 33755

**Current Mailing Address:**

1959 CLEARVIEW LAKE DR  
CLEARWATER, FL 33755

**FEI Number:** 47-4830642

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BURDEN, MARILOU  
1959 CLEARVIEW LAKE DR  
CLEARWATER, FL 33755 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 D  
Name CABERTO, MARIA RHIM  
Address 1959 CLEARVIEW LAKE DR  
City-State-Zip: CLEARWATER FL 33755

Title PS  
Name BURDEN, MARILOU  
Address 1959 CLEARVIEW LAKE DR  
City-State-Zip: CLEARWATER FL 33755

*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:** MARILOU BURDEN

**OWNER**

**01/31/2018**

Electronic Signature of Signing Officer/Director Detail

Date