

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000090597

Entity Name: ANDERSON HOME CARE AGENCY INC

Current Principal Place of Business:

2366 MALIBU LN
NORTH PORT, FL 34286

Current Mailing Address:

2366 MALIBU LN
NORTH PORT, FL 34286

FEI Number: 47-5535079

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAX MARSHALLS INC
3480 DEPEW AVE
PORT CHARLOTTE, FL 33952 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 PSTD
Name REID, JOANNA
Address 2366 MALIBU LN
City-State-Zip: NORTH PORT FL 34286

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: JOANNA REID

PSTD

04/29/2017

Electronic Signature of Signing Officer/Director Detail

Date