## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000061904

Entity Name: HOME HEALTH SYSTEMS, INC.

**Current Principal Place of Business:** 

12975 POSITANO CIRCLE NAPLES. FL 34105

## **Current Mailing Address:**

P.O. BOX 211

NAPLES, FL 34106 US

FEI Number: 58-1865114 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Apr 22, 2019

**Secretary of State** 

4402413657CC

## Officer/Director Detail:

Title PRESIDENT

Name MCGOLDRICK, MARY

Address P.O. BOX 211

City-State-Zip: NAPLES FL 34106

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.

Electronic Signature of Signing Officer/Director Detail