

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000001478

**FILED**  
**Mar 07, 2017**  
**Secretary of State**  
**CC9464179805**

**Entity Name:** ADVANCED HOMECARE MANAGEMENT, INC.

**Current Principal Place of Business:**

6688 N CENTRAL EXPRESSWAY SUITE 1300  
DALLAS, TX 75206

**Current Mailing Address:**

6688 N CENTRAL EXPRESSWAY SUITE 1300  
DALLAS, TX 75206 US

**FEI Number: 32-0125426**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 PD  
Name COTHARP, DOUGLAS E  
Address 3660 GRANDVIEW PARKWAY, SUITE 200  
City-State-Zip: BIRMINGHAM AL 35243

Title VPD  
Name JACOBSMEYER, BARBARA A  
Address 3660 GRANDVIEW PARKWAY, SUITE 200  
City-State-Zip: BIRMINGHAM AL 35243

Title VP  
Name MCCALLUM, ROBERT W III  
Address 3660 GRANDVIEW PARKWAY, SUITE 200  
City-State-Zip: BIRMINGHAM AL 35243

Title VP  
Name PRICE, ANDREW L  
Address 3660 GRANDVIEW PARKWAY, SUITE 200  
City-State-Zip: BIRMINGHAM AL 35243

Title VPSD  
Name DARBY, J.PATRICK  
Address 3660 GRANDVIEW PARKWAY, SUITE 200  
City-State-Zip: BIRMINGHAM AL 35243

Title VP  
Name WISNER, ROBERT M  
Address 3660 GRANDVIEW PARKWAY SUITE 200  
City-State-Zip: BIRMINGHAM AL 35243

Title T  
Name FAY, EDMUND M  
Address 3660 GRANDVIEW PARKWAY SUITE 200  
City-State-Zip: BIRMINGHAM AL 35243

Title AS  
Name MURVIN, SANDRA W  
Address 3660 GRANDVIEW PARKWAY SUITE 200  
City-State-Zip: BIRMINGHAM AL 35243

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

**SIGNATURE: APRIL ANTHONY**

**VICE PRESIDENT**

**03/07/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name ANTHONY, APRIL  
Address 6688 N CENTRAL EXPRESSWAY SUITE 1300  
City-State-Zip: DALLAS TX 75206

Title VP  
Name THOMPSON, G.ROBERT  
Address 6688 N CENTRAL EXPRESSWAY  
SUITE 1300  
City-State-Zip: DALLAS TX 75206