

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24234

Entity Name: HOME INTENSIVE CARE, INC.

FILED
Jul 07, 2021
Secretary of State
1339000906CC

Current Principal Place of Business:

920 WINTER STREET
TAX DEPT
WALTHAM, MA 02451

Current Mailing Address:

920 WINTER STREET
TAX DEPT
WALTHAM, MA 02451

FEI Number: 61-0892053

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. 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 AT
Name MELLO, BRYAN
Address 920 WINTER STREET
City-State-Zip: WALTHAM MA 02451

Title SV
Name GLEDHILL, KAREN
Address 920 WINTER STREET
City-State-Zip: WALTHAM MA 02451

Title DP
Name ASSELTA, MICHAEL
Address 920 WINTER STREET
TAX DEPT
City-State-Zip: WALTHAM MA 02451

Title DIRECTOR, CEO
Name VALLE, WILLIAM
Address 920 WINTER STREET
TAX DEPT
City-State-Zip: WALTHAM MA 02451

Title ASST. SECRETARY
Name HAWKINS, JULIE
Address 920 WINTER STREET
TAX DEPT
City-State-Zip: WALTHAM MA 02451

Title VP
Name VALLE, RYAN
Address 920 WINTER STREET
TAX DEPT
City-State-Zip: WALTHAM MA 02451

Title VP
Name DIVITO, JAMES
Address 920 WINTER STREET
TAX DEPT
City-State-Zip: WALTHAM MA 02451

Title ASST. TREASURER
Name RIZZO, DOROTHY
Address 920 WINTER STREET
TAX DEPT
City-State-Zip: WALTHAM MA 02451

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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: BRYAN MELLO

ASSISTANT TREASURER 07/07/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name MARK, FAWCETT
Address 920 WINTER STREET
 TAX DEPT
City-State-Zip: WALTHAM MA 02451

Title SECRETARY
Name KAREN, GLEDHILL
Address 920 WINTER STREET
 TAX DEPT
City-State-Zip: WALTHAM MA 02451