

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005699

Entity Name: ABLE PALMS HOME HEALTH OF SPRING HILL, INC.

Current Principal Place of Business:

1107 HAZELTINE BLVD., STE 200
CHASKA, MN 55318

Current Mailing Address:

1107 HAZELTINE BLVD., STE 200
CHASKA, MN 55318 US

FEI Number: 47-2456857

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
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 S
Name OLSON, DENISE A
Address 1107 HAZELTINE BLVD., STE 200
City-State-Zip: CHASKA MN 55318

Title DIRECTOR
Name WEICHERT, JAMES A
Address 1107 HAZELTINE BOULEVARD
SUITE 200
City-State-Zip: CHASKA MN 55318

Title T
Name BENSON, RANDALL
Address 1107 HAZELTINE BLVD., STE 200
City-State-Zip: CHASKA MN 55318

Title PRESIDENT
Name EDINGER, CRAIG E
Address 1107 HAZELTINE BOULEVARD
SUITE 200
City-State-Zip: CHASKA MN 55318

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: CRAIG E. EDINGER

PRESIDENT

01/31/2017

Electronic Signature of Signing Officer/Director Detail

Date