

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000004430

Entity Name: ABLE PALMS HOME & HEALTH CARE SERVICES, INC.

Current Principal Place of Business:

1107 HAZELTINE BOULEVARD
SUITE 200
CHASKA, MN 55318

Current Mailing Address:

1107 HAZELTINE BOULEVARD
SUITE 200
CHASKA, MN 55318 US

FEI Number: 41-1753931

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 PD
Name GOODMAN, JOHN B
Address 1107 HAZELTINE BLVD SUITE 200
City-State-Zip: CHASKA MN 55318

Title T
Name NUTTING, RONALD F
Address 1107 HAZELTINE BOULEVARD
SUITE 200
City-State-Zip: CHASKA MN 55318

Title SECRETARY
Name OLSON, DENISE A
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: JOHN B. GOODMAN

PRESIDENT

02/13/2015

Electronic Signature of Signing Officer/Director Detail

Date