

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214532526

1.) CORPORATION NAME:

Loving Hearts Home Healthcare Inc.

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CIARA HILL
3101 AMERICAN LEGION RD.
SUITE 10**

SCC ID NO: **07658446**

CHESAPEAKE, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CHESAPEAKE CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3101 American Legion Rd.
Suite 10

CITY/ST/ZIP: CHESAPEAKE, VA 23321

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	CIARA HILL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2024 Barclay Place		
CITY/ST/ZIP/CO:	Apt. 104 Suffolk, VA 23435		

NAME:	PHYLLIS HILL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2024 Barclay Place		
CITY/ST/ZIP/CO:	Apt. 104 Suffolk, VA 23435		

NAME:	LYDIA RIDDICK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	3944 QUAILSHIRE LANE		
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23321		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ CIARA HILL</u>	<u>CIARA HILL, PRESIDENT</u>	<u>6/24/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.