2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# L08000009007

Entity Name: OXYGEN RESCUE CARE CENTERS OF AMERICA, LLC

Current Principal Place of Business:

525 NE 3RD AVE, SUITE 106
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

525 NE 3RD AVE, SUITE 106
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 26-1905578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MENKHAUS, DAVID J
1900 GLADES ROAD, SUITE 401
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P ( ) Change (X) Addition
Name: CRALLE, RAYMOND H
Address: 525 NE 3RD AVE, SUITE 106
City-St-Zip: DELRAY BEACH, FL 33444

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RAYMOND H CRALLE P 03/27/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date