

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 06, 2008 8:00 am
Secretary of State

05-06-2008 90003 014 ***138.75

60039487



01252008 Chg-LLC CR2E083 (12/06)

DOCUMENT # M02000002314 1. Entity Name LC HEALTHCARE HOLDING COMPANY, LLC					
Principal Place of Business 3570 KEITH STREET, N.W. CLEVELAND, TN 37312			Mailing Address 3570 KEITH STREET, N.W. CLEVELAND, TN 37312		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 75-3079050	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGR <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PRESTON, FORREST L		NAME		
STREET ADDRESS	3570 KEITH STREET, N.W.		STREET ADDRESS		
CITY-ST-ZIP	CLEVELAND, TN 37312		CITY-ST-ZIP		
TITLE	MGR <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DEVELOPERS INVESTMENT COMPANY II, INC		NAME		
STREET ADDRESS	3570 KEITH ST NW		STREET ADDRESS		
CITY-ST-ZIP	CLEVELAND, TN 37312		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
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CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Joan E. Thurmond</i>			Date: 4-14-08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
Joan E. Thurmond, Assistant Secretary of Corporate Manager					

ATTACHMENT

60039487

W02000002314
EXHIBIT "A"

LC Healthcare Holding Company, LLC
3570 Keith Street, NW
Cleveland, TN 37312

Members

Forrest L. Preston 3570 Keith Street, NW Cleveland, TN 37312

Developers Investment Company 3570 Keith Street, NW Cleveland, TN 37312
II, Inc.

Corporate Manager

Developers Investment Company II, Inc.

Officers

N/A

ATTACHMENT

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EXHIBIT "A"

Developers Investment Company II, Inc.
3570 Keith Street, NW
Cleveland, TN 37312
(423) 473-5868

Officers:

President:	Forrest L. Preston	3570 Keith Street, NW Cleveland, TN 37312
Vice President/ Treasurer/Secretary:	Angelena Y. Clayton	3570 Keith Street, NW Cleveland, TN 37312
Assistant Secretary:	Joan E. Thurmond	3570 Keith Street, NW Cleveland, TN 37312
Assistant Secretary:	Cindy S. Cross	3570 Keith Street, NW Cleveland, TN 37312

Directors:

Forrest L. Preston	3570 Keith Street, NW Cleveland, TN 37312
Angelena Y. Clayton	3570 Keith Street, NW Cleveland, TN 37312