

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001485

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** LOGISTICARE SOLUTIONS, LLC

**Current Principal Place of Business:**

1800 PHOENIX BLVD., SUITE 120  
COLLEGE PARK, GA 30349

**New Principal Place of Business:**

1275 PEACHTREE STREET, 6TH FLOOR  
ATLANTA, GA 30309

**Current Mailing Address:**

1800 PHOENIX BLVD., SUITE 120  
COLLEGE PARK, GA 30349

**New Mailing Address:**

1275 PEACHTREE STREET, 6TH FLOOR  
ATLANTA, GA 30309

FEI Number: 58-2491253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGR  
Name: HERMAN, SCHWARZ M  
Address: 1706 BRANDYWINE CT  
City-St-Zip: ATLANTA, GA 30338

I hereby 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: M. CHINTA GASTON/ELD

GC

04/19/2011

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