

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023657

FILED
Apr 29, 2009
Secretary of State

Entity Name: VITIER LTC RECRUITERS LLC

Current Principal Place of Business:

1359 VIA DE PEPI
BOYNTON BEACH, FL 33426

New Principal Place of Business:

625 CASA LOMA BLVD.
SUITE 706
BOYNTON BEACH, FL 33435

Current Mailing Address:

1359 VIA DE PEPI
BOYNTON BEACH, FL 33426

New Mailing Address:

625 CASA LOMA BLVD.
SUITE 706
BOYNTON BEACH, FL 33435

FEI Number: 30-0470200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUTLIN, STANLEY
6239 GREENVIEW TERRACE
BOCA RATON, FL 33433 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: MGRM () Delete
Name: RUSSELL, MARGARET
Address: 44 LANCASTER RD.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGRM () Delete
Name: MICOCCI, ROSA
Address: 83 NOTTINGHAM PLACE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGRM () Delete
Name: SOLIS, MERCEDES
Address: 1359 VIA DE PEPI
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARGARET RUSSELL

MGRM

04/29/2009

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