

2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F99000000619

FILED
Jun 06, 2011
Secretary of State

Entity Name: LILLIBRIDGE HEALTHCARE SERVICES, INC.

Current Principal Place of Business:

10350 ORMSBY PARK PLACE
SUITE 300
LOUISVILLE, KY 40223

New Principal Place of Business:

Current Mailing Address:

10350 ORMSBY PARK PLACE
SUITE 300
LOUISVILLE, KY 40223

New Mailing Address:

FEI Number: 36-4273203

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

OFFICERS AND DIRECTORS:

Title: PD
Name: LILLIBRIDGE, TODD
Address: 115 S LASALLE STREET, 30TH FLOOR
City-St-Zip: CHICAGO, IL 60603

Title: VP
Name: GERAGHTY, KEVIN
Address: 115 S LASALLE STREET, 30
City-St-Zip: CHICAGO, IL 60603

Title: CFO
Name: KURZYDYM, JOSEPH
Address: 115 S LASALLE STREET, 30TH FLOOR
City-St-Zip: CHICAGO, IL 60603

Title: VP
Name: CLABOUGH, STEVEN
Address: C/O 3661 SOUTH MIAMI AVE, SUITE 101
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH G. KURZYDYM

CFO

06/06/2011

Electronic Signature of Signing Officer or Director

Date