

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018465

Entity Name: KATHY'S HOMECARE, LLC

FILED
Feb 14, 2005
Secretary of State

Current Principal Place of Business:

1768 HUDSON ST.
ENGLEWOOD, FL 34223 SA

New Principal Place of Business:

Current Mailing Address:

1768 HUDSON ST.
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 65-1147076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASGOW, KATHY L
1768 HUDSON ST
ENGLEWOOD, FL 34223 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/MEMBERS:

Title: MGRM () Delete
Name: GLASGOW, KATHY L CEO
Address: 1768 HUDSON ST
City-St-Zip: ENGLEWOOD, FL 34223 SA

Title: MGRM () Delete
Name: GLASGOW, RICHARD A CFO
Address: 1768 HUDSON ST
City-St-Zip: ENGLEWOOD, FL 34223 SA

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), 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: RICHARD A. GLASGOW

CFO

02/14/2005

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