

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020389

FILED
Apr 03, 2009
Secretary of State

Entity Name: ONGOING CARE SOLUTIONS COSTA RICA, L.L.C.

Current Principal Place of Business:

6545-44TH STREET NORTH
UNIT 4007
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

6545-44TH STREET NORTH
UNIT 4007
PINELLAS PARK, FL 33781

New Mailing Address:

FEI Number: 59-3756795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILKINSON, G. BARRY
696 FIRST AVENUE NORTH, SUITE 201
ST. PETERSBURG, FL 33701 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: LEE, LINDA
Address: 942 GALLITON WAY
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES:

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: LINDA LEE

VP

04/03/2009

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