2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030082

FILED Apr 22, 2005 Secretary of State

Entity Name: ASSOCIATED FAMILY SERVICES OF FLORIDA, L.L.C.

Current Principal Place of Business: New Principal Place of Business:

1495 N.W. 17TH AVENUE MIAMI, FL 33125

Current Mailing Address: New Mailing Address:

1495 N.W. 17TH AVENUE

MIAMI, FL 33125

FEI Number: 83-0342613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HANEY, MARK T HANEY, MARK T

215 SOUTH MUNROE STREET, SECOND FLOOR 215 SOUTH MONROE STREET, SECOND FLOOR

TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32301 US

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: MARK T. HANEY 04/22/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 GARGIS, BRIAN R
 Name:

 Address:
 1495 NW 17TH AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33125
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SHARKEY, VINCE
 Name:

 Address:
 10621 SE LE PARK
 Address:

 City-St-Zip:
 TEQUESTA, FL 33469
 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: BRIAN R. GARGIS MGR 04/22/2005