

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033638

FILED
Apr 20, 2004
Secretary of State

Entity Name: SKILLED SERVICES OF AUSTIN, LLC

Current Principal Place of Business:

11300 4TH STREET, NORTH, SUITE 200
ST. PETERSBURG, FL 33716

New Principal Place of Business:

Current Mailing Address:

11300 4TH STREET, NORTH, SUITE 200
ST. PETERSBURG, FL 33716

New Mailing Address:

FEI Number: 61-1439826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHIFINO, WILLIAM J JR
201 N. FRANKLIN STREET, SUITE 2600
ONE TAMPA CITY CENTER
TAMPA, FL 33602 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: CEO () Delete
Name: JOHNSON, DARIAN W
Address: 11300 4TH STREET N STE 200
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: COO (X) Delete
Name: CURTISS, MARK P
Address: 13000 4TH STREET, NORTH, SUITE 200
City-St-Zip: ST. PETERSBURG, FL 33716

Title: CFO (X) Delete
Name: SMITH, PAMELA A
Address: 11300 4TH STREET, NORTH, SUITE 200
City-St-Zip: ST. PETERSBURG, FL 33716

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SKILLED SERVICES COR, PORATION
Address: 11300 4TH STREET N STE 200
City-St-Zip: SAINT PETERSBURG, FL 33716

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: SKILLED SERVICES CORPORATION

MGRM

04/20/2004

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