2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000004765

FILED Oct 20, 2008 Secretary of State

Entity Name: COMPREHENSIVE HOME CARE OF HERNANDO, LLC

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

4034 COMMERCIAL WAY SPRING HILL, FL 34606

Current Mailing Address: New Mailing Address:

33920 US HWY 19 N 6450 NW 5TH WAY

SUITE 341 FT LAUDERDALE, FL 33309 PALM HARBOR, FL 34684

FEI Number: 05-0554161 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:

MENKHAUS, DAVID J 2424 NORTH FEDERAL HIGHWAY STE. 456 MENKHAUS, DAVID J 1900 GLADES ROAD

BOCA RATON, FL 33431 US SUITE 401

BOCA RATON, FL 33431 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: 10/20/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name: COMPREHENSIVE WELLNE, SS SERVICES, I N C. Name: BRAGG, GARRETT W

 Address:
 6540 NW 5TH WAY
 Address:
 6450 NW 5TH WAY

 City-St-Zip:
 FT. LAUDERDALE, FL 33309
 City-St-Zip:
 FT. LAUDERDALE, FL 33309

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

 Name:
 Name:
 BRAGG, DENISE

 Address:
 Address:
 6450 NW 5TH WAY

 City-St-Zip:
 City-St-Zip:
 FT LAUDERDALE, FL 33309

Title: () Delete Title: MGRM () Change (X) Addition Name: Name: ALT, LES

Address: Address: 6450 NW 5TH WAY

City-St-Zip: City-St-Zip: FT LAUDERDALE, FL 33309

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

 Name:
 Name:
 MENKHAUS, DAVID J

 Address:
 Address:
 6450 NW 5TH WAY

 City-St-Zip:
 City-St-Zip:
 FT LAUDERDALE, FL 33309

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: GARRETT W. BRAGG MGRM 10/20/2008