2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006422

Entity Name: COMPREHENSIVE HOME CARE OF PALM BEACH, LLC

FILED Apr 26, 2005 Secretary of State

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

6450 NW 5TH WAY

FT. LAUDERDALE,, FL 33309 US

Current Mailing Address: New Mailing Address:

6450 NW 5TH WAY 33920 US HWY 19 N

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

FEI Number: 56-2324896 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 HWY SUITE 456 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

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

 Name:
 COMPREHENSIVE WELLNE, SS SERVICES, I N C.
 Name:

 Address:
 6450 NW 5TH WAY
 Address:

 City-St-Zip:
 FT. LAUDERDALE,, FL 33309 US
 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: GARRETT BRAGG MGRM 04/26/2005