2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# L03000006599

Entity Name: ONSITE CLINICAL SERVICES, LLC

Current Principal Place of Business:

27 QUAIL HOLLOW ROAD
AGAWAM, MA 01001

New Principal Place of Business:

Current Mailing Address:

27 QUAIL HOLLOW ROAD
AGAWAM, MA 01001

New Mailing Address:

FEI Number: 81-0596822 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAHONEY, DAVID S
21440 NORTH MILLBROOK COURT
BOCA RATON, FL 33498 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: MGR ( ) Delete
Name: MAHONEY, DAVID S PRESIDE
Address: 21440 NORTH MILLBROOK COURT
City-St-Zip: BOCA RATON, FL 33498

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 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: DAVID S. MAHONEY MGR 01/06/2006

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