2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011313

Entity Name: CARESERVICES OF THE PLATINUM COAST, LLC

FILED Mar 04, 2008 Secretary of State

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

2500 QUANTUM LAKES DRIVE, SUITE 108 2500 QUANTUM LAKES DRIVE, BOYNTON BEACH, FL 33426

SUITE 108

BOYNTON BEACH, FL 33426

Current Mailing Address: New Mailing Address:

2500 QUANTUM LAKES DRIVE. 2500 QUANTUM LAKES DRIVE, SUITE 108

BOYNTON BEACH, FL 33426 SUITE 108

BOYNTON BEACH, FL 33426

FEI Number: 47-0914815 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TODD, STEPHEN ROLLE, JULIA

2500 QUANTUM LAKES DRIVE, SUITE 108 2500 QUANTUM LAKES DRIVE,

BOYNTON BEACH, FL 33426 SUITE 108 BOYNTON BEACH, FL 33426 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: STEPHEN TODD 03/04/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

LINDSEY, CHRIS TODD, STEPHEN Name: Name:

2500 QUANTUM LAKES DRIVE, SUITE 108 Address: 2500 QUANTUM LAKES DRIVE, SUITE 108 Address:

City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: BOYNTON BEACH, FL 33426

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

BELLOMY, GREG Name: CAMMARATA, DANIEL Name: Address: 2500 QUANTUM LAKES DRIVE, SUITE 108 Address:

2500 QUANTUM LAKES DRIVE, SUITE 108 City-St-Zip: BOYNTON BEACH, FL 33426

BOYNTON BEACH, FL 33426 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition TODD, STEVE Name: Name:

2500 QUANTUM LAKES DRIVE, SUITE 108 Address: Address: City-St-Zip: BOYTNON BEACH, FL 33426 City-St-Zip:

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

FAUST, BOYD Name: Name: 2500 QUANTUM LAKES DRIVE, SUITE 108 Address: Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip:

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: STEPHEN TODD 03/04/2008