

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029703

FILED  
Aug 18, 2008  
Secretary of State

**Entity Name:** ZONECARE USA OF DELRAY, LLC

**Current Principal Place of Business:**

223 NE 5TH AVE.  
DELRAY BEACH, FL 33483 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8379  
DELRAY BEACH, FL 33482 US

**New Mailing Address:**

**FEI Number:** 81-0633083      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MCCULLOUGH, MICHELLE CONTRLR  
223 NE 5TH AVE.  
DELRAY BEACH, FL 33483 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: MGRM ( ) Delete  
Name: WILSON, BEVAN BEHN  
Address: P.O. BOX 8049  
City-St-Zip: DELRAY BEACH, FL 33483

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MSC GROUP, INC.,  
Address: 841 PRUDENTIAL DRIVE, STE. 900  
City-St-Zip: JACKSONVILLE, FL 32207

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: JOSEPH D. MCCULLOUGH

CEO

08/18/2008

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