2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# L04000012319

Entity Name: EPSILON HEALTH CARE PROPERTIES, LLC

Current Principal Place of Business:

10210 HIGHLAND MANOR DR.
SUITE 250
TAMPA, FL 33610

New Principal Place of Business:

10210 HIGHLAND MANOR DR.
SUITE 270
TAMPA, FL 33610

Current Mailing Address:

10210 HIGHLAND MANOR DR.
SUITE 250
TAMPA, FL 33610

New Mailing Address:

10210 HIGHLAND MANOR DR.
SUITE 270
TAMPA, FL 33610

FEI Number: 20-1000103 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: FLORIDA HEALTH CARE, PROPERTIES, LL C
Address: 10210 HIGHLAND MANOR DR STE 250
City-St-Zip: TAMPA, FL 33610

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: AR (X) Change ( ) Addition
Name: COSBY, TRACEY C
Address: 303 PERIMETER CENTER NORTH, SUITE 500
City-St-Zip: ATLANTA, GA 30346

Title: AR ( ) Change (X) Addition
Name: BENCH, G S
Address: 10210 HIGHLAND MANOR DRIVE
City-St-Zip: TAMPA, FL 33610

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: TRACEY C. COSBY, AUTHORIZED REPRESENTATIVE AR 05/01/2007

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