

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029027

FILED
Feb 25, 2009
Secretary of State

Entity Name: PREMIER HOME CARE, LLC

Current Principal Place of Business:

3513 CHIPSHOT CT.
COLUMBUS, OH 43228

New Principal Place of Business:

Current Mailing Address:

3513 CHIPSHOT CT.
COLUMBUS, OH 43228

New Mailing Address:

FEI Number: 20-1019985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINCAID, SHELLY
11450 HARBOR WAY, UNIT 5006
LARGO, FL 33774 US

Name and Address of New Registered Agent:

MATT, SHELLY
11450 HARBOR WAY, UNIT 5006
LARGO, FL 33774 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: SHELLY MATT

02/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GRAY, LYNN M
Address: 3513 CHIPSHOT COURT
City-St-Zip: COLUMBUS, OH 43228

Title: MGRM () Delete
Name: MATT, SHELLY
Address: 4219 TOWNSHIP ROAD #21
City-St-Zip: MARENGO, OH 43334

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: MATT, SHELLY
Address: 4655 SR 179
City-St-Zip: MARENGO, OH 43334

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: SHELLY MATT

MGRM

02/25/2009

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