

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000029027

**FILED**  
**Mar 01, 2010**  
**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:**

MATT, SHELLY  
11450 HARBOR WAY, UNIT 5006  
LARGO, FL 33774 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  
**Name:** GRAY, LYNN M  
**Address:** 3513 CHIPSHOT COURT  
**City-St-Zip:** COLUMBUS, OH 43228

**Title:** MGRM  
**Name:** MATT, SHELLY  
**Address:** 4655 SR 179  
**City-St-Zip:** MARENGO, OH 43334

I hereby 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 R. MATT

CEO

03/01/2010

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