2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2007
Secretary of State

DOCUMENT# L04000033665

Entity Name: HOMETOWN HOMECARE, LLC

Current Principal Place of Business:

340 E. CENTRAL AVE
WINTER HAVEN, FL 33880 US

New Principal Place of Business:

250 MAGNOLIA AVE., SW
SUITE 300
WINTER HAVEN, FL 33880 US

Current Mailing Address:

5445 ALTON ROAD
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 84-1646288 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SULLIVAN, DAVID O
5445 ALTON ROAD
MIAMI BEACH, FL 33140 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: MGR ( ) Delete
Name: SULLIVAN, DAVID O
Address: 5445 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140 US

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID O. SULLIVAN MGR 02/14/2007

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