

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033912

FILED
Apr 28, 2006
Secretary of State

Entity Name: COMPREHENSIVE HOME CARE OF SOUTHWEST FLORIDA, LLC

Current Principal Place of Business:

33920 US HIGHWAY 19 N STE. 341
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

33920 US HIGHWAY 19 N STE. 341
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 11-3717982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENKHAUS, DAVID J
1900 GLADES ROAD STE. 401
BOCA RATON, FL 33431 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: COMPREHENSIVE HOME A, CRE OF SW FL
Address: 33920 US HWY 19 N
City-St-Zip: PALM HARBOR, FL 34684

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: GARRETT BRAGG

MGR

04/28/2006

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