

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033912

FILED  
Mar 10, 2009  
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

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

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

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BRAGG, GARRETT W  
Address: 6450 NW 5TH WAY  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: MGRM ( ) Change (X) Addition  
Name: ALT, LES  
Address: 6450 NW 5TH WAY  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: MGRM ( ) Change (X) Addition  
Name: MENKHAUS, DAVID J  
Address: 1900 GLADES ROAD SUITE 401  
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM ( ) Change (X) Addition  
Name: BRAGG, DENISE  
Address: 6450 NW 5TH WAY  
City-St-Zip: FT. LAUDERDALE, FL 33309

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: GARRETT W. BRAGG

MGRM

03/10/2009

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