

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062338

FILED  
Jul 10, 2006  
Secretary of State

**Entity Name:** GENTLE TOUCH HOME HEALTH CARE SERVICES LLC

**Current Principal Place of Business:**

7863 HAMPTON BLVD.  
NORTH LAUDERDALE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

7863 HAMPTON BLVD.  
NORTH LAUDERDALE, FL 33068

**New Mailing Address:**

4631 NW 31ST AVENUE  
SUITE 278  
FORT LAUDERDALE, FL 33309

FEI Number: 26-0096619      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

THOMAS, CAROL  
2733 S. OAKLAND FOREST DRIVE  
#202  
OAKLAND PARK, FL 33309 US

**Name and Address of New Registered Agent:**

THOMAS, CAROL  
7852 NUTMEG COURT  
TAMARAC, FL 33321 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:

07/10/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THOMAS, CAROL  
Address: 2733 S. OAKLAND FOREST DRIVE, #202  
City-St-Zip: OAKLAND PARK, FL 33309

Title: MGRM ( ) Delete  
Name: THOMAS, AVIS  
Address: 7863 HAMPTON BLVD.  
City-St-Zip: NORTH LAUDERDALE, FL 33068

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: THOMAS, CAROL S  
Address: 7852 NUTMEG COURT  
City-St-Zip: TAMARAC, FL 33321

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: CAROL S THOMAS

MGRM

07/10/2006

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