2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 01, 2005
Secretary of State

DOCUMENT# L04000078979

Entity Name: EXPRESS CARE TITUSVILLE, LLC

Current Principal Place of Business:

734 HAWKSBILL ISLAND DRIVE
SATELLITE BEACH, FL 32937

New Principal Place of Business:

2990 NEW HAVEN AVE
WEST MELBOURNE, FL 32904

Current Mailing Address:

734 HAWKSBILL ISLAND DRIVE
SATELLITE BEACH, FL 32937

New Mailing Address:

2990 NEW HAVEN AVE
WEST MELBOURNE, FL 32904

FEI Number: **FEI Number Applied For (X)** **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:

SHUMAN, MARK D
1800 W. HIBISCUS BLVD.
SUITE 138
MELBOURNE, FL 32901 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: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR ( ) Change (X) Addition
Name: LAIRD, RICHARD K MG MEMB
Address: 734 HAWKSBILL ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD K. LAIRD MR 08/01/2005

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