

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000048163

FILED
Apr 27, 2006
Secretary of State

Entity Name: VILLAGE HOME CARE OF THE PALM BEACHES, LLC

Current Principal Place of Business:

10900 NW HWY. 27
OCALA, FL 34482

New Principal Place of Business:

4733 W. ATLANTIC AVENUE
C16
DELRAY BEACH, FL 33445

Current Mailing Address:

10900 NW HWY. 27
OCALA, FL 34482

New Mailing Address:

2760 SE 17TH STREET
SUITE 101
OCALA, FL 34471

FEI Number: 20-2843571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODAK, JOY
10900 NW HWY. 27
OCALA, FL 34482 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: CEO () Change (X) Addition
Name: RODAK, JOY L CEO
Address: 10900 NW HIGHWAY 27
City-St-Zip: OCALA, FL 34482 MA

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: JOY L. RODAK

CEO

04/27/2006

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