

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022846

FILED  
Apr 14, 2007  
Secretary of State

Entity Name: HOME CARE SPECIALIST, LLC

**Current Principal Place of Business:**

1658 19TH AVENUE SOUTH  
SAINT PETERSBURG, FL 33712

**New Principal Place of Business:**

**Current Mailing Address:**

1658 19TH AVENUE SOUTH  
SAINT PETERSBURG, FL 33712

**New Mailing Address:**

FEI Number: 57-1231022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STENGER, RONALD J  
1658 19TH AVENUE SOUTH  
SAINT PETERSBURG, FL, FL 33712 US

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

FOWLER, DEBORAH A  
1658 19TH AVENUE SOUTH  
SAINT PETERSBURG, FL, FL 33712 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: DEBORAH A FOWLER

04/14/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: FOWLER, DEBORAH A  
Address: 1658 19TH AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: MGR ( ) Delete  
Name: STENGER, RONALD J  
Address: 1658 19TH AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: STENGER, RONALD J  
Address: 1658 19TH AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: MGR (X) Change ( ) Addition  
Name: FOWLER, DEBORAH A  
Address: 1658 19TH AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

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: DEBORAH A FOWLER

MGR

04/14/2007

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