2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 03, 2008
Secretary of State

DOCUMENT# L06000024169

Entity Name: LIFE SKILLS CASE MANAGEMENT LLC

Current Principal Place of Business:

205 NE 5TH TERRACE
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

205 NE 5TH TERRACE
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 20-4470826 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

MICHAEL J MCGOEY CPA INC
639 EAST OCEAN AVE
SUITE 101
BOYNTON BEACH, FL 33435 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: FITZGERALD, THOMAS
Address: 8279 BERMUDA SOUND WAY
City-St-Zip: BOYNTON BEACH, FL 33436

Title: MGRM ( ) Delete
Name: HIRSEMANN, CLAUDIA
Address: 4159 OAK TERRACE DR.
City-St-Zip: GREENACRES, FL 33463

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: THOMAS J. FITZGERALD CEO 07/03/2008

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