

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000024169

**FILED**  
**Jul 28, 2009**  
**Secretary of State****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:**1030 SOUTH FEDERAL HWY  
DELRAY BEACH, FL 33483**Current Mailing Address:**PO BOX 244621  
BOYNTON BEACH, FL 33424**New Mailing Address:**1030 SOUTH FEDERAL HWY  
DELRAY BEACH, FL 33483**FEI Number:** 20-4470826**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****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 33436Title: 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: MGRM (X) Change ( ) Addition  
Name: HIRSEMANN, CLAUDIA  
Address: 11211 S MILITARY TRAIL  
City-St-Zip: BOYNTON BEACH, FL 33436

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

MGRM

07/28/2009

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