

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000039270

FILED
Apr 22, 2007
Secretary of State

Entity Name: SPECIAL TOUCH HOME CARE, LLC

Current Principal Place of Business:

167 ALGONQUIN ST
PORT CHARLOTTE, FL 33954 US

New Principal Place of Business:

1478 NINA ST
PORT CHARLOTTE, FL 33952 US

Current Mailing Address:

167 ALGONQUIN ST
PORT CHARLOTTE, FL 33954 US

New Mailing Address:

1478 NINA ST
PORT CHARLOTTE, FL 33952 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JEAN, JENNIFER
167 ALGONQUIN ST.
PORT CHARLOTTE, FL 33954 US

Name and Address of New Registered Agent:

JEAN, JENNIFER
1478 NINA ST
PORT CHARLOTTE, FL 33952 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: JENNIFER JEAN

04/22/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JEAN, JENNIFER
Address: 167 ALGONQUIN ST.
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: MGRM () Delete
Name: JEAN, GERDA
Address: 167 ALGONQUIN ST.
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: MGRM () Delete
Name: MONTALEMENT, JAMYL
Address: 167 ALGONQUIN ST.
City-St-Zip: PORT CHARLOTTE, FL 33954 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JEAN, JENNIFER
Address: 1478 NINA ST
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGRM (X) Change () Addition
Name: JEAN, GERDA
Address: 1478 NINA ST
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGRM (X) Change () Addition
Name: MONTALEMENT, JAMYL
Address: 1478 NINA ST
City-St-Zip: PORT CHARLOTTE, FL 33952 US

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: JENNIFER JEAN

MGR

04/22/2007

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