2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043665

Entity Name: HOMECARE FRIENDS, LLC.

FILED Sep 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6983 LAFAYETTE PARK DRIVE 55 PEBBLE BEACH DRIVE JACKSONVILLE, FL 32244 PALM COAST, FL 32164

Current Mailing Address: New Mailing Address:

6983 LAFAYETTE PARK DRIVE PO BOX 441154

JACKSONVILLE, FL 32244 JACKSONVILLE, FL 32222

FEI Number: 26-0278834 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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: Name and Address of New Registered Agent:

DESIREE, MCDOWELL DESIREE, ERTULY 6983 LAFÁYETTE PARK DRIVE 55 PEBBLE BEACH DRIVE US JACKSONVILLE, FL 32222 PALM COAST, FL 32164

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: DESIREE ERTULY 09/12/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM () Delete

UPSCALE LIFESTYLE CO, NCIERGE Name: 6983 LAFAYETTE PARK DRIVE Address:

City-St-Zip: JACKSONVILLE, FL 32244 US

Title: MGRM () Delete

Name: THE HOUSEKEEPER'S CL, EANING SERVICE

Address: 6983 LAFAYETTE PARK DRIVE

City-St-Zip: JACKSONVILLE, FL 32222

Title: () Delete

Name: Address:

City-St-Zip:

City-St-Zip:

Title: () Delete

Name: Address: ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition UPSCALE LIFESTYLE CO, NCIERGE Name:

Address: PO BOX 441154

City-St-Zip: JACKSONVILLE, FL 32222 US

Title: (X) Change () Addition Name: THE HOUSEKEEPER'S CL, EANING SERVICE

Address: PO BOX 441154

City-St-Zip: JACKSONVILLE, FL 32222

Title: MGR () Change (X) Addition

STALLWORTH, CAROL Name: 55 PEBBLE BEACH DRIVE Address: City-St-Zip: PALM COAST, FL 32164

Title: MGRM () Change (X) Addition

Name: DESIREE, ERTULY CEO Address: PO BOX 441154 City-St-Zip: JACKSONVILLE, FL 32222

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: DESIREE ERTULY **MGRM** 09/12/2007