

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053867

FILED
Apr 26, 2008
Secretary of State

Entity Name: HOMETOWN LEGAL NURSE CONSULTING, LLC

Current Principal Place of Business:

9825 BUBBLING BROOK COURT
OVIEDO, FL 32765

New Principal Place of Business:

3289 TALLWOOD DRIVE
DELTONA, FL 32738

Current Mailing Address:

9825 BUBBLING BROOK COURT
OVIEDO, FL 32765

New Mailing Address:

3289 TALLWOOD DRIVE
DELTONA, FL 32738

FEI Number: 20-4930845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEGRAFF, JODI L
9825 BUBBLING BROOK COURT
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

DEGRAFF, JODI L
3289 TALLWOOD DRIVE
DELTONA, FL 32738 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:

04/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DEGRAFF, JODI L
Address: 9825 BUBBLING BROOK COURT
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DEGRAFF, JODI L
Address: 3289 TALLWOOD DRIVE
City-St-Zip: DELTONA, FL 32738

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: JODI L DEGRAFF

MGR

04/26/2008

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