2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048706

City-St-Zip:

PALM HARBOR, FL 34683

Entity Name: HOMEBOUND THERAPY, LLC

FILED Jan 13, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 638 SEDGEWICK WAY PALM HARBOR, FL 34683 **Current Mailing Address: New Mailing Address:** 638 SEDGEWICK WAY PALM HARBOR, FL 34683 FEI Number: 20-8800976 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE HOUSE OF TAXES, LLC 15108 HEATHRIDGE DRIVE PALM HARBOR, FL 34683 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: ADDITIONS/CHANGES: MGR () Delete Title: () Change () Addition NOIA, AMY Name: Name: Address: 638 SEDGEWICK WAY Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: NOIA, DANIEL Name: Address: 638 SEDGEWICK WAY 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: AMY L NOIA MGR 01/13/2008