

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051504

FILED  
Apr 02, 2008  
Secretary of State

**Entity Name:** CENTER FOR COMPREHENSIVE PALLIATIVE CARE, L.L.C.

**Current Principal Place of Business:**

3231 SW 34TH AVENUE  
OCALA, FL 34474

**New Principal Place of Business:**

3231 SW 34TH AVENUE  
OCALA, FL 34474 US

**Current Mailing Address:**

P.O. BOX 4860  
OCALA, FL 344784860

**New Mailing Address:**

P.O. BOX 4860  
OCALA, FL 344784860 US

**FEI Number:** 65-1309935

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PRIVETT, ALICE J  
3231 SW 34TH AVENUE  
OCALA, FL 34474 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: PRIVETT, ALICE J  
Address: 3231 SW 34TH AVENUE  
City-St-Zip: Ocala, FL 34474 US

Title: MGR ( ) Change (X) Addition  
Name: KNOX, MICHAEL A  
Address: 3231 SW 34TH AVENUE  
City-St-Zip: Ocala, FL 34474 US

Title: MGR ( ) Change (X) Addition  
Name: BAKER, M. THERESA  
Address: 628 SE 17TH STREET  
City-St-Zip: Ocala, FL 34471 US

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:** ALICE J. PRIVETT

MGR

04/02/2008

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