

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000054622

FILED
Mar 21, 2009
Secretary of State

Entity Name: COMPASSIONATE CARE NR LLC

Current Principal Place of Business:

2500 QUANTUM LAKES DRIVE
SUITE 203
BOYNTON BEACH, FL 33426 US

Current Mailing Address:

2500 QUANTUM LAKES DRIVE
SUITE 203
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

1500 GATEWAY BLVD.
SUITE 220
BOYNTON BEACH, FL 33426 US

New Mailing Address:

1500 GATEWAY BLVD.
SUITE 220
BOYNTON BEACH, FL 33426 US

FEI Number: 26-0220063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIANKA, LORI
2500 QUANTUM LAKES DRIVE
SUITE 203
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

KIANKA, LORI
1500 GATEWAY BLVD.
SUITE 220
BOYNTON BEACH, FL 33426 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:

03/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KIANKA, LORI
Address: 2500 QUANTUM LAKES DRIVE #203
City-St-Zip: BOYNTON BEACH, FL 33426 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KIANKA, LORI
Address: 1500 GATEWAY BLVD. SUITE 220
City-St-Zip: BOYNTON BEACH, FL 33426 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: LORI KIANKA

MGRM

03/21/2009

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