

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000057729

FILED
Apr 23, 2008
Secretary of State

Entity Name: PROGRESSIVE HOME HEALTHCARE AGENCY, LLC

Current Principal Place of Business:

19451 SHERIDAN STREET
#195
FORT LAUDERDALE, FL 33332

New Principal Place of Business:

Current Mailing Address:

19451 SHERIDAN STREET
#195
FORT LAUDERDALE, FL 33332

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BARNETT, GENTLE L
1851 NW 125TH AVENUE
SUITE 440
PEMBROKE PINES, FL 33028 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: MGRM () Delete
Name: BARNETT, GENTLE L III
Address: 19451 SHERIDAN STREET, #195
City-St-Zip: FORT LAUDERDALE, FL 33332

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
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: GENTLE BARNETT

MGRM

04/23/2008

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