2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2009
Secretary of State

DOCUMENT# L07000103159

Entity Name: FIRST STEPS HOME HEALTH CARE, LLC

Current Principal Place of Business:

701 JC CENTER COURT,
SUITE 5
PORT CHARLOTTE, FL 33954 US

New Principal Place of Business:

Current Mailing Address:

701 JC CENTER COURT,
SUITE 5
PORT CHARLOTTE, FL 33954 US

New Mailing Address:

FEI Number: 26-1215419 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STURGES, ERNEST W JR.
701 JC CENTER COURT
SUITE 3
PORT CHARLOTTE, FL 33954 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: ANTHONY, DAVID L JR.
Address: 701 JC CENTER COURT, SUITE 5
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: MGRM ( ) Delete
Name: ANTHONY, JODY L
Address: 701 JC CENTER COURT, SUITE 5
City-St-Zip: PORT CHARLOTTE, FL 33954 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DAVID L. ANTHONY, JR. MGRM 03/29/2009

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