

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000114863

FILED
Apr 30, 2009
Secretary of State

Entity Name: PROVIDERS WHO CARE HOME HEALTH AGENCY LLC

Current Principal Place of Business:

3200 N FEDERAL HIGHWAY, STE 206
BOCA RATON, FL 33431

New Principal Place of Business:

3200 N FEDERAL HIGHWAY
SUITE 206-15
BOCA RATON, FL 33431

Current Mailing Address:

20401 NW 2ND AVE
STE 208
MIAMI, FL 33167

New Mailing Address:

3200 N FEDERAL HIGHWAY
SUITE 206-15
BOCA RATON, FL 33431

FEI Number: 83-0499358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATTERSON, MAUREEN M
6300 W 35TH COURT
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

PATTERSON, MAUREEN M
6300 SW 35TH COURT
MIRAMAR, FL 33023 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:

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PATTERSON, MAUREEN M
Address: 6300 W 35TH COURT
City-St-Zip: MIRAMAR, FL 33023

Title: MGR () Delete
Name: JOHNSON, DAVID C JR
Address: 6300 W 35TH COURT
City-St-Zip: MIRAMAR, FL 33023

Title: MGR () Delete
Name: ROY, GREGORY G
Address: 11121 MINNEAPOLIS DR
City-St-Zip: COOPER CITY, FL 33026

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PATTERSON, MAUREEN M
Address: 6300 SW 35TH COURT
City-St-Zip: MIRAMAR, FL 33023

Title: MGR (X) Change () Addition
Name: JOHNSON, DAVID C JR
Address: 3804 SAN SIMEON CIRCLE
City-St-Zip: WESTON, FL 33331

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: MAUREEN PATTERSON

MGR

04/30/2009

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