

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000114863

FILED
Feb 19, 2010
Secretary of State

Entity Name: PROVIDERS WHO CARE HOME HEALTH AGENCY LLC

Current Principal Place of Business:

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

New Principal Place of Business:

3200 N FEDERAL HIGHWAY
SUITE 108
BOCA RATON, FL 33431

Current Mailing Address:

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

New Mailing Address:

3200 N FEDERAL HIGHWAY
SUITE 108
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 SW 35TH COURT
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

PATTERSON, MAUREEN M
3846 W GARDENIA AVE
WESTON, FL 33332 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: MAUREEN PATTERSON

02/19/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: PATTERSON, MAUREEN M
Address: 3846 W GARDENIA AVE
City-St-Zip: WESTON, FL 33332

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

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

I hereby 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

02/19/2010

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