

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000121403

FILED
Oct 08, 2009
Secretary of State**Entity Name:** INFINITY HOMECARE OF DISTRICT 9, LLC**Current Principal Place of Business:**2201 CANTU COURT
SUITE 116
SARASOTA, FL 34232**New Principal Place of Business:**1400 SW GOLDTREE DR
SUITE 207
PORT SAINT LUCIE, FL 34952**Current Mailing Address:**2201 CANTU COURT
SUITE 116
SARASOTA, FL 34232**New Mailing Address:**1400 SW GOLDTREE DR
SUITE 207
PORT SAINT LUCIE, FL 34952**FEI Number:** 26-1520109**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MOXLEY, R. ROBERT
2201 CANTU COURT
SUITE 116
SARASOTA, FL 34232 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: INFINITY HOME CARE LLC
Address: 2201 CANTU CT. SUITE #116
City-St-Zip: SARASOTA, FL 34232Title: MGRM () Delete
Name: JOSEPHSON, TODD H
Address: 2201 CANTU CT. SUITE #116
City-St-Zip: SARASOTA, FL 34232Title: MGRM () Delete
Name: MOXLEY, R. ROBERT
Address: 2201 CANTU CT. SUITE #116
City-St-Zip: SARASOTA, FL 34232**ADDITIONS/CHANGES:**Title: MGR (X) Change () Addition
Name: MARS, LLC
Address: 2201 CANTU CT. SUITE #116
City-St-Zip: SARASOTA, FL 34232Title: () 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: TODD JOSEPHSON

MRGM

10/08/2009

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