2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125723

Entity Name: ASSISTING HANDS OF ORLANDO, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1802 N ALAFAYA TRAIL SUITE 112 ORLANDO, FL 32826 US	1826 N ALAFAYA TRAIL SUITE 200 ORLANDO, FL 32826 US

Current Mailing Address:	**New Mailing Address:**
1802 N ALAFAYA TRAIL SUITE 112 ORLANDO, FL 32826 US	101 LANTERN VIEW PEACHTREE CITY, GA 30269 US

FEI Number: 26-1199796   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
TAWAN ACCOUNTING & TAX, LLC 13000 AVALON LAKE DRIVE SUITE 207 ORLANDO, FL 32828 US	GOEDTKE, CHRISTINE J S 1826 N ALAFAYA TRAIL SUITE 200 ORLANDO, FL 32826 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: CHRISTINE J GOEDTKE   09/02/2009
_____
             Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MRGM ( ) Delete		Title:	MRGM (X) Change ( ) Addition
Name:	JNCC GROUP, INC.		Name:	GOEDTKE, CHRISTINE J S
Address:	9825 MARSH POINTE DRIVE		Address:	101 LANTERN VIEW
City-St-Zip:	ORLANDO, FL 32832 US		City-St-Zip:	PEACHTREE CITY, GA 30269 US

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: CHRISTINE J GOEDTKE   S   09/02/2009
_____
             Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date