2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000019370

Entity Name: ELITE HOME ASSISTANTS, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1360 W. BARWICK RANCH CIRCLE DELRAY BEACH, FL 33445	

Current Mailing Address:	**New Mailing Address:**
1360 W. BARWICK RANCH CIRCLE DELRAY BEACH, FL 33445	

FEI Number: 32-0235024   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
CILETTI, CHRISTINE 22669 ROYAL CROWN TERRACE EAST BOCA RATON, FL 33433 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: _____

        Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR
Name:	CASTAGNA, DEBRA
Address:	1360 W. BARWICK RANCH CIRCLE
City-St-Zip:	DELRAY BEACH, FL 33445

Title:	MGR.
Name:	CASTAGNA, DEBRA C
Address:	1360 W. BARWICK RANCH CIRCLE
City-St-Zip:	DELRAY BEACH, FL 33445

Title:	MGR.
Name:	CASTAGNA, DEBRA C
Address:	1360 W. BARWICK RANCH CIRCLE
City-St-Zip:	DELRAY BEACH, FL 33445

Title:	MGR.
Name:	CASTAGNA, DEBRA C
Address:	1360 W. BARWICK RANCH CIRCLE
City-St-Zip:	DELRAY BEACH, FL 33445

Title:	MGR.
Name:	CASTAGNA, DEBRA C
Address:	1360 W. BARWICK RANCH CIRCLE
City-St-Zip:	DELRAY BEACH, FL 33445

Title:	MGR.
Name:	CASTAGNA, DEBRA C
Address:	1360 W. BARWICK RANCH CIRCLE
City-St-Zip:	DELRAY BEACH, FL 33445

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 Statues.

SIGNATURE: DEBBIE CASTAGNA   MGR   02/21/2011

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