2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

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Entity Name: ABSOLUTE CARE PLUS SERVICES, LLC

Current Principal Place of Business:

1965 42ND AVENUE
SUITE #3
VERO BEACH, FL 32960 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 6003
VERO BEACH, FL 32961 US

New Mailing Address:

FEI Number: 26-2043981 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WEBB-MEADOWS, KIMBERLY M
1965 42ND AVENUE
SUITE #3
VERO BEACH, FL 32960 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: MGR
Name: WEBB-MEADOWS, KIMBERLY M
Address: 1965 42ND AVENUE, SUITE #3
City-St-Zip: VERO BEACH, FL 32960 US

Title: MGR
Name: MONROE, SHANTREIRRA L
Address: 1965 42ND AVENUE, SUITE #3
City-St-Zip: VERO BEACH, FL 32960 US

Title: MGRM
Name: BAKER, RENA A
Address: 1965 42ND AVENUE, SUITE #3
City-St-Zip: VERO BEACH, FL 32960

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: KIMBERLY M. WEBB-MEADOWS MGR 04/30/2012

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