2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2010
Secretary of State

DOCUMENT# L08000047119

Entity Name: MEDICAL HOMECARE HOLDINGS, LLC

Current Principal Place of Business:

4664 LAKE WORTH ROAD
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

4664 LAKE WORTH ROAD
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 65-0407855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LECKER, MAURICE J
4664 LAKE WORTH ROAD
LAKE WORTH ROAD, FL 33463 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: VP
Name: LECKER, MAURICE J
Address: 4664 LAKE WORTH ROAD
City-St-Zip: LAKE WORTH, FL 33463

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: MAURICE LECKER VP 02/16/2010

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