2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2010
Secretary of State

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Entity Name: A PLUS HOME HEALTH CARE LLC

Current Principal Place of Business:

1111 HYPOLUXO ROAD
SUITE 107
LANTANA, FL 33462

New Principal Place of Business:

1111 HYPOLUXO ROAD
SUITE 107
LANTANA, FL 33462 US

Current Mailing Address:

1111 HYPOLUXO ROAD
SUITE 107
LANTANA, FL 33462

New Mailing Address:

1111 HYPOLUXO ROAD
SUITE 107
LANTANA, FL 33462 US

FEI Number: 61-1561994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEMEROFSKY, TRACY A
1111 HYPOLUXO ROAD
STE. 107
LANTANA, FL 33462 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
Name: NEMEROFSKY, TRACY A
Address: 1111 HYPOLUXO ROAD, STE. 107
City-St-Zip: LANTANA, FL 33462 US

Title: MGR
Name: NEMEROFSKY, STEPHEN L
Address: 1111 HYPOLUXO ROAD, STE. 107
City-St-Zip: LANTANA, FL 33462 US

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: STEPHEN NEMEROFSKY MGR 01/07/2010

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