2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

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Entity Name: HEALING HANDS OF SUWANNEE COUNTY, LLC

Current Principal Place of Business:

405 11TH STREET SW
SUITE 101-A
LIVE OAK, FL 32064

New Principal Place of Business:

Current Mailing Address:

405 11TH STREET SW
SUITE 101-A
LIVE OAK, FL 32064

New Mailing Address:

FEI Number: 36-4633873 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FOWLER, THERESA MGRM
405 11TH STREET SW
SUITE 101-A
LIVE OAK, FL 32064 US

Name and Address of New Registered Agent:

LATREILLE, HOLLI J MGRM
405 11TH STREET SW
SUITE 101-A
LIVE OAK, FL 32064 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: HOLLI J. LATREILLE 04/20/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: LATREILLE, HOLLI J
Address: 405 11TH STREET SW, SUITE 101-A
City-St-Zip: LIVE OAK, FL 32064

Title: MGRM
Name: LATREILLE, ZACHARY L
Address: 405 11TH STREET SW, SUITE 101-A
City-St-Zip: LIVE OAK, FL 32064

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: HOLLI J. LATREILLE MGRM 04/20/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date