

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000073726

**FILED
Mar 30, 2010
Secretary of State**

Entity Name: PROVIDENT CARE MANAGEMENT, LLC

Current Principal Place of Business:

6412 NORTH UNIVERSITY DR
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

12685 MAPLE RD
NORTH MIAMI, FL 33181 US

New Mailing Address:

FEI Number: 26-3143148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OH, TAEHO
12685 MAPLE RD
NORTH MIAMI, FL 33181 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: OH, TAEHO
Address: 12685 MAPLE RD
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: MGR
Name: WILLOUGHBY, JACQUELINE
Address: 13375 SW 39TH STREET
City-St-Zip: DAVIE, FL 33330 US

Title: MGR
Name: KOBETZ, LORI
Address: 20200 NW 8TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGR
Name: SOTOMAYOR, JOSE
Address: 1970 NE 119TH RD
City-St-Zip: NORTH MIAMI, FL 33181 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 Statutes.

SIGNATURE: TAEHO OH

MGR

03/30/2010

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