

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000101050

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** PINARD HOME HEALTH SERVICES, LLC

**Current Principal Place of Business:**

4849 S.E. 110TH STREET, SUITE 57  
BELLEVIEW, FL 34420

**New Principal Place of Business:**

5925 SE ABSHIER BLVD  
BELLEVIEW, FL 34420 US

**Current Mailing Address:**

4849 S.E. 110TH STREET, SUITE 57  
BELLEVIEW, FL 34420

**New Mailing Address:**

5925 SE ABSHIER BLVD  
BELLEVIEW, FL 34420 US

**FEI Number:** 59-3712361

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRIMI, MICHAEL  
10762 SOUTH U.S. HIGHWAY 441  
BELLEVIEW, FL 34420 US

**Name and Address of New Registered Agent:**

CRIMI, MICHAEL JR  
10762 SOUTH U.S. HIGHWAY 441  
BELLEVIEW, FL 34420 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: MICHAEL CRIMI, JR.

04/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CRIMI, MICHAEL JR  
Address: 10762 S. U.S. HIGHWAY 441  
City-St-Zip: BELLEVIEW, FL 34420 US

Title: MGRM  
Name: CORNELIUS, MARC  
Address: 5925 SE ABSHIER BLVD  
City-St-Zip: BELLEVIEW, FL 34420 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: MICHAEL CRIMI, JR.

MGRM

04/28/2011

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