

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112979

FILED
Apr 27, 2010
Secretary of State

Entity Name: HCSN OUTPATIENT SUBSTANCE ABUSE PROGRAM LLC

Current Principal Place of Business:

13155 SW 134 ST
UNIT 102
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

15160 SW 136 ST
UNIT 18
MIAMI, FL 33196

New Mailing Address:

FEI Number: 26-3855686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ARMANDO E
15160 SW 136 ST
UNIT 18
MIAMI, FL 33196 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: GONZALEZ, ARMANDO E
Address: 15160 SW 136 ST UNIT18
City-St-Zip: MIAMI, FL 33196

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: ARMANDO GONZALEZ

MGRM

04/27/2010

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