

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000017199

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** ALWAYS HOPE ADULT HOMECARE, LLC

**Current Principal Place of Business:**

13370 S.W. 32ND STREET  
MIRAMAR, FL 33307

**New Principal Place of Business:**

1836 S. FEDERAL HIGHWAY  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

13370 S.W. 32ND STREET  
MIRAMAR, FL 33307

**New Mailing Address:**

1836 S. FEDERAL HIGHWAY  
DELRAY BEACH, FL 33483

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOTTLIEB, BRUCE M ESQ.  
125 NORTH 46TH AVENUE  
HOLLYWOOD, FL 33021 US

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

RUBIN, MARCI A ESQ.  
4000 HOLLYWOOD BOULEVARD  
SUITE 375-S  
HOLLYWOOD, FL 33021 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: MARCI A. RUBIN, ESQ.

04/26/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BERRY, SALLY  
Address: 1836 S. FEDERAL HIGHWAY  
City-St-Zip: DELRAY BEACH, FL 33483

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: SALLY BERRY

MGRM

04/26/2010

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