

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000041125

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** ATHENA HOME HEALTH AGENCY, LLC

**Current Principal Place of Business:**

2137 NORTH 14 AVENUE  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

3350 S.W. 148 AVENUE  
SUITE 110  
MIRAMAR, FL 33027

**Current Mailing Address:**

2137 NORTH 14 AVENUE  
HOLLYWOOD, FL 33020

**New Mailing Address:**

3350 S.W. 148 AVENUE  
SUITE 110  
MIRAMAR, FL 33027

**FEI Number:** 80-0398205

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEL CASTILLO, CATHERINE  
823 NW 133 COURT  
MIAMI, FL 33182 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:** RODRIGUEZ, JESUS H  
**Address:** 13363 NW 8 LANE  
**City-St-Zip:** MIAMI, FL 33182

**Title:** MGR  
**Name:** DEL CASTILLO, CATHERINE  
**Address:** 823 NW 133 COURT  
**City-St-Zip:** MIAMI, FL 33182

**Title:** MGR  
**Name:** GONZALEZ, RITA M  
**Address:** 15414 SW 25 TERRACE  
**City-St-Zip:** MIAMI, FL 33185

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:** JESUS H. RODRIGUEZ

MGRM

04/14/2010

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