

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000062797

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** PERSONAL ASSISTANCE PLUS, L.L.C.

**Current Principal Place of Business:**

6825 WAGON WHEEL CIR  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

6825 WAGON WHEEL CIR  
SARASOTA, FL 34243

**New Mailing Address:**

FEI Number: 50-9564604

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCGINNESS, W LEE  
1800 SECOND STREET STE 971  
SARASOTA, FL 34236 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: RANCK, RUTH M  
Address: 6825 WAGON WHEEL CIR  
City-St-Zip: SARASOTA, FL 34243 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: RUTH M. RANCK

MGR

02/21/2011

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