2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2011
Secretary of State

DOCUMENT# L09000101547

Entity Name: ALTERNATIVE CARE SOLUTIONS LLC.

Current Principal Place of Business:

1947 NE 21ST STREET
FORT LAUDERDALE, FL 33305

New Principal Place of Business:

Current Mailing Address:

1947 NE 21ST STREET
FORT LAUDERDALE, FL 33305

New Mailing Address:

FEI Number: 27-1705311 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PLACE, CHRISTOPHER L
1947 NE 21ST STREET
FORT LAUDERDALE, FL 33305 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: PLACE, CHRISTOPHER L
Address: 1947 NE 21ST STREET
City-St-Zip: FORT LAUDERDALE, FL 33305

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 Statues.

SIGNATURE: CHRISTOPHER PLACE MGRM 01/08/2011

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