

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000102174

FILED
Feb 21, 2011
Secretary of State

Entity Name: AT HOME INFUSION SERVICES LLC

Current Principal Place of Business:

4722 NW 2ND AVENUE
SUITE C-110
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

4722 NW 2ND AVENUE
SUITE C-110
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 27-1171329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KACZMAREK, KAREN
3725 NW 3RD AVENUE
BOCA RATON, FL 33431 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: KACZMAREK, KAREN
Address: 3725 NW 3RD AVENUE
City-St-Zip: BOCA RATON, FL 33431 US

Title: MGR
Name: KACZMAREK, EDWARD G
Address: 3725 NW 3RD AVE
City-St-Zip: BOCA RATON, FL 33431 US

Title: MGR
Name: HINES, RHONDA
Address: 3389 SHERIDAN STREET, SUITE 190
City-St-Zip: HOLLYWOOD, FL 33021

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: KAREN KACZMAREK

MGR

02/21/2011

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