

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000102174

FILED  
Feb 09, 2012  
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:

3500 NW BOCA RATON BLVD  
SUITE 704  
BOCA RATON, FL 33431 US

## Current Mailing Address:

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

## New Mailing Address:

3500 NW BOCA RATON BLVD  
SUITE 704  
BOCA RATON, FL 33431 US

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: MAGAFAS, ELIZABETH  
Address: 4722 NW 2ND AVE - STE C-110  
City-St-Zip: BOCA RATON, FL 33431

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

02/09/2012

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