

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000112676

**FILED  
Apr 19, 2011  
Secretary of State**

**Entity Name:** PALM BEACH NURSING CARE LLC

**Current Principal Place of Business:**

2499 GLADES RD.  
SUITE 105  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

2499 GLADES RD.  
SUITE 105  
BOCA RATON, FL 33431

**New Mailing Address:**

**FEI Number:** 27-1358828      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

AVENDANO, IVIS JANET  
2499 GLADES RD.  
SUITE 105  
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:** AVENDANO, IVIS JANET  
**Address:** 2499 GLADES RD. SUITE 105  
**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: IVIS JANET AVENDANO      MGR      04/19/2011

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