2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2011
Secretary of State

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Entity Name: EXTENDED HANDS LIFECARE, LLC

Current Principal Place of Business:

800 WESTWOOD SQUARE, STE E
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

800 WESTWOOD SQUARE, STE E
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 27-2940036 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KOLTUN, JEFFREY M
557 NORTH WYMORE ROAD
SUITE 100
MAITLAND, FL 32751 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: KISER, DAVID R
Address: 4688 HALL ROAD
City-St-Zip: ORLANDO, FL 32817

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: DAVID R KISER MGR 01/21/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date