

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000066583

FILED
Mar 12, 2012
Secretary of State

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 ()

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 Statutes.

SIGNATURE: DAVID R KISER

MGR

03/12/2012

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