

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000081617

FILED
Mar 22, 2012
Secretary of State

Entity Name: CENTRAL FLORIDA HOME HEALTH, LLC

Current Principal Place of Business:

1200 WEST 434, SUITE 112
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1200 WEST 434, SUITE 112
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 26-3232407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NISI, FRANK
587 LAKE HOWELL ROAD
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

HEUBERGER, PATRICIA
5130 LINTON BLVD
SUITE B-7
DELRAY BEACH, FL 33484 US

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: PATRICIA HEUBERGER

03/22/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DOWNS, MICHAEL J
Address: 5130 LINTON BLVD, SUITE B-7
City-St-Zip: DELRAY BEACH, FL 33484

Title: MGRM
Name: HEUBERGER, PATRICIA
Address: 5130 LINTON BLVD, SUITE B-7
City-St-Zip: DELRAY BEACH, FL 33484

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: PATRICIA HEUBERGER

MGRM

03/22/2012

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