

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000020813

Entity Name: PSI HOME HEALTH LLC

FILED
Apr 27, 2012
Secretary of State

Current Principal Place of Business:

3493 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

3493 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PSI STAFFING SOLUTIONS INC
3493 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426 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: COOPER, SYLVIA
Address: 11062 SOUTH MILITARY TRAIL
City-St-Zip: BOYNTON BEACH, FL 33436

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: SYLVIA COOPER

MGR

04/27/2012

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