2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003089

Entity Name: METCARE, LLC

FILED Apr 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

500 AUSTRALIAN AVENUE SOUTH, #400 250 SOUTH AUSTRALIAN AVE

W. PALM BEACH, FL 33401 SUITE 400

WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

500 AUSTRALIAN AVENUE SOUTH, SUITE 1000 250 SOUTH AUSTRALIAN AVE

W. PALM BEACH, FL 33401 SUITE 400

WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

FARLEY MICHAEL M

(X) Change () Addition

FEI Number: 65-0923569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EARLEY, MICHAEL EARLEY, MICHAEL M
250 AUSTRALIAN AVE SOUTH 400 250 SOUTH AUSTRALIAN AVE

WEST PALM BEACH, FL 33401 US SUITE 400

WEST PALM BEACH, FL 33401 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: MICHAEL M. EARLEY 04/26/2004

Electronic Signature of Registered Agent Date

Name:

MANAGING MEMBERS/MEMBERS:

Title: PD () Delete
Name: STEINBERG, FRED
Address: 250 AUSTRALIAN AVE S #400

 Address:
 250 AUSTRALIAN AVE S #400
 Address:
 250 SOUTH AUSTRALIAN AVE #400

 City-St-Zip:
 W. PALM BEACH, FL 33401
 City-St-Zip:
 WEST PALM BEACH, FL 33401

Title: V () Delete Title: MGR (X) Change () Addition Name: FINNEL, DEBBIE FINNEL, DEBBIE

Address: 250 AUSTRALIAN AVE S #400 Address: 250 SOUTH AUSTRLIAN AVE #400 City-St-Zip: W. PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Delete Title: MGR (X) Change () Addition GARTNER, DAVID Name: PALENZUELA, ROBERTO L Name: 250 AUSTRALIAN AVE S #400 250 SOUTH AUSTRALIAN AE #400 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: MICHAEL M. EARLEY PD 04/26/2004