2008 LIMITED LIABILITY COMPANY

ANNUAL REPORT

DOCUMENT # M02000002314 LC HEALTHCARE HOLDING COMPANY, LLC

May 06, 2008 8:00 am Secretary of State 05-06-2008 90003 014 ***138.75 60039487 Principal Place of Business Mailing Address 3570 KEITH STREET, N.W. 3570 KEITH STREET, N.W. CLEVELAND, TN 37312 CLEVELAND, TN 37312 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01252008 Chq-LLC CR2E083 (12/06) City & State City & State Applied For 4. FEI Number 75-3079050 Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Make check payable to Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 9. 10. MGR TITLE Delete TITLE ☐ Change Addition PRESTON, FORREST L NAME NAME 3570 KEITH STREET, N.W. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEVELAND, TN 37312 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME DEVELOPERS INVESTMENT COMPANY II, INC. NAME STREET ADDRESS STREET ADDRESS 3570 KEITH ST NW CITY-ST-ZIP CLEVELAND, TN 37312 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F Channe ☐ Addition TOTALE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 peepiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. limited liability company or the re-

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND THEO OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #

FILED



LC Healthcare Holding Company, LLC 3570 Keith Street, NW Cleveland, TN 37312

Members

Forrest L. Preston

3570 Keith Street, NW

Cleveland, TN 37312

Developers Investment Company

3570 Keith Street, NW

Cleveland, TN 37312

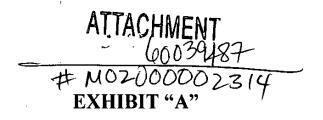
II, Inc.

Corporate Manager

Developers Investment Company II, Inc.

Officers

N/A



Developers Investment Company II, Inc. 3570 Keith Street, NW Cleveland, TN 37312 (423) 473-5868

Officers:

President: Forrest L. Preston 3:

3570 Keith Street, NW Cleveland, TN 37312

Vice President/

Treasurer/Secretary:

Angelena Y. Clayton

3570 Keith Street, NW Cleveland, TN 37312

Assistant Secretary:

Joan E. Thurmond

3570 Keith Street, NW Cleveland, TN 37312

Assistant Secretary:

Cindy S. Cross

3570 Keith Street, NW Cleveland, TN 37312

Directors:

Forrest L. Preston

3570 Keith Street, NW Cleveland, TN 37312

Angelena Y. Clayton

3570 Keith Street, NW Cleveland, TN 37312