

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001432

FILED
Mar 23, 2007
Secretary of State

Entity Name: MANAGEMENT HEALTH SERVICES, LLC

Current Principal Place of Business:

3201 WEST COMMERCIAL BLVD.
SUITE 116
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 9386
COLUMBUS, GA 31908 US

New Mailing Address:

FEI Number: 13-4273462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASTEN, MONTE C
3201 WEST COMMERCIAL BLVD.
SUITE 116
FORT LAUDERDALE, FL 33309 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 () Delete
Name: LEMONIER, MICHAEL K
Address: 5608 PRINCETON AVENUE
City-St-Zip: COLUMBUS, GA 31908

Title: MGR () Delete
Name: PARKER, JAMES H
Address: 5608 PRINCETON AVENUE
City-St-Zip: COLUMBUS, GA 31908

Title: MGR () Delete
Name: KASTEN, MONTE C
Address: 3201 WEST COMMERCIAL BLVD., STE.116
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGR () Delete
Name: KASTEN, TODD S
Address: 3201 WEST COMMERCIAL BLVD., STE.116
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JAMES H PARKER

MGR

03/23/2007

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