2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2011
Secretary of State

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Entity Name: U.S. HEALTHCARE HOLDINGS, LLC

Current Principal Place of Business:

101 S.E. THIRD STREET
EVANSVILLE, IN 47708

New Principal Place of Business:

Current Mailing Address:

32313 MONACO PLACE
AVON LAKE, OH 44012

New Mailing Address:

FEI Number: 16-1684061 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MERITAIN HEALTH, INC.
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226 US

Title: PRES
Name: COOPERSTONE, ELLIOT S
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

Title: SEC
Name: BALOGH, ANDREA L
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

Title: TREA
Name: DIMURA, VINCENT J
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

Title: DIR
Name: COOPERSTONE, ELLIOT S
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

Title: DIR
Name: PHAM, HUY T
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

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 Statues.

SIGNATURE: ANDREA BALOGH S 01/16/2011

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