

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000003687

FILED
Jul 12, 2006
Secretary of State

Entity Name: BIRDMONT HEALTH CARE, LLC

Current Principal Place of Business:

246 2ND ST. N.
SAFETY HARBOR, FL 34695

New Principal Place of Business:

1022 MAIN STREET
STE H
DUNEDIN, FL 34698 US

Current Mailing Address:

246 2ND ST. N.
SAFETY HARBOR, FL 34695

New Mailing Address:

1022 MAIN STREET
STE H
DUNEDIN, FL 34698

FEI Number: 20-2970323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ATKINS, BEN
246 2ND ST. N.
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

ATKINS, BEN
1022 MAIN STREET
STE H
DUNEDIN, FL 34698 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: BEN ARTKINS

07/12/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ATKINS, BEN
Address: 246 2ND ST. N.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGRM () Delete
Name: MORRISON, MARYN
Address: 246 2ND ST. N.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGRM () Delete
Name: TUCKER, DAVID
Address: 246 2ND ST. N.
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ATKINS, BEN
Address: 1022 MAIN STREET
City-St-Zip: DUNEDIN, FL 34698

Title: MGRM (X) Change () Addition
Name: MORRISON, MARYN
Address: 1022 MAIN STREET
City-St-Zip: DUNEDIN, FL 34698

Title: MGRM (X) Change () Addition
Name: TUCKER, DAVID
Address: 1022 MAIN STREET
City-St-Zip: DUNEDIN, FL 34698

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: BEN ATKINS

MGRM

07/12/2006

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