2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2006
Secretary of State

DOCUMENT# M05000004316

Entity Name: COMMITMENT TO HEALTH (CTH), LLC

Current Principal Place of Business:

160 WEST CAMINO REAL #231
BOCA RATON, FL 33432

New Principal Place of Business:

8576 COUNTY ROAD 313
TERRELL, TX 75161

Current Mailing Address:

160 WEST CAMINO REAL #231
BOCA RATON, FL 33432

New Mailing Address:

8576 COUNTY ROAD 313
TERRELL, TX 75161

FEI Number: 33-0967206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SMITH, KENT
160 WEST CAMINO REAL #231
BOCA RATON, FL 33432 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: MANNELLA-SMITH, LENORE
Address: 160 WEST CAMINO REAL #231
City-St-Zip: BOCA RATON, FL 33432

Title: MGR ( ) Delete
Name: SMITH, KENT
Address: 160 WEST CAMINO REAL #231
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MANNELLA-SMITH, LENORE
Address: 8576 COUNTY ROAD 313
City-St-Zip: TERRELL, TX 75161

Title: MGR (X) Change ( ) Addition
Name: SMITH, KENT
Address: 8576 COUNTY ROAD 313
City-St-Zip: TERRELL, TX 75161

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: LENORE MANNELLA-SMITH MGR 03/30/2006

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