

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004316

**FILED**  
**Mar 18, 2008**  
**Secretary of State**

**Entity Name:** COMMITMENT TO HEALTH (CTH), LLC

**Current Principal Place of Business:**

8576 COUNTY ROAD 313  
TERRELL, TX 75161

**New Principal Place of Business:**

1200 NORTH FEDERAL HIGHWAY  
200  
BOCA RATON, FL 33432

**Current Mailing Address:**

8576 COUNTY ROAD 313  
TERRELL, TX 75161

**New Mailing Address:**

P.O. BOX 2888  
ORMOND BEACH, FL 32175

**FEI Number:** 33-0967206

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**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:**

SMITH, KENT  
1200 NORTH FEDERAL HIGHWAY  
200  
BOCA RATON, FL 33432 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:**

03/18/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MANNELLA-SMITH, LENORE  
Address: 1200 NORTH FEDERAL HIGHWAY, SUITE200  
City-St-Zip: BOCA RATON, FL 33432

Title: MGR (X) Change ( ) Addition  
Name: SMITH, KENT  
Address: 1200 NORTH FEDERAL HIGHWAY, SUITE 200  
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify 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

MGRM

03/18/2008

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