

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000003998

FILED
Apr 18, 2012
Secretary of State

Entity Name: INVACARE HCS, LLC

Current Principal Place of Business:

1655 BRITTAIN RD
AKRON, OH 44310

New Principal Place of Business:

Current Mailing Address:

ONE INVACARE WAY
ELYRIA, OH 44035

New Mailing Address:

FEI Number: 02-0708028

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: P
Name: BLOUCH, GERALD B
Address: ONE INVACARE WAY
City-St-Zip: ELYRIA, OH 44035 M

Title: MGRM
Name: NVACARE CORPORATION
Address: ONE INVACARE WAY
City-St-Zip: ELYRIA, OH 44036

Title: D
Name: BELL, LYNDA
Address: 1655 BRITTAIN ROAD
City-St-Zip: AKRON, OH 44310

Title: AS
Name: BARNHOLTZ, DREW
Address: ONE INVACARE WAY
City-St-Zip: ELYRIA, OH 44035

Title: S
Name: LAPLACA, ANTHONY C
Address: ONE INVACARE WAY
City-St-Zip: ELYRIA, OH 44035

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 Statutes.

SIGNATURE: DREW BARNHOLTZ

AS

04/18/2012

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