2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004095

Entity Name: HEALTH SERVICES MANAGEMENT OF FLORIDA, LLC

FILED Jan 24, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
714 CHURCH STREET, STE A MURFREESBORO, TN 37130				6208 W CORPORATE OAKS DR CRYSTAL RIVER, FL 34429		
Current Mailing Address:				New Mailing Address:		
714 CHURCH STREET, STE A MURFREESBORO, TN 37130				6208 W CORPORATE OAKS DR CRYSTAL RIVER, FL 34429		
FEI Number	: 20-5198485	FEI Number Applied For ()	FEI Nur	nber Not App	licable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1200 SOU PLANTAT	PORATION SYS ITH PINE ISLAN ION, FL 33324	ND ROAD US	UF0 000 0	f changing i	ito rogistor	and affice as registered agent, as both
	e named entity s e of Florida.	submits this statement for the p	urpose o	or changing i	its register	ed office or registered agent, or both,
SIGNATU	RE:					
	Electron	ic Signature of Registered Age	nt			Date
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	` '	· · · · · · · · · · · · · · · · · · ·		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	6208 W C	() Change (X) Addition MES E PRESIDE ORPORATE OAKS DR RIVER, FL 34429
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	714 S CHI	() Change (X) Addition Y, RICK E VP/SEC JRCH STREET, SUITE A ESBORO, TN 37130
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	714 S CHI	() Change (X) Addition Y, MARSHALL P DIRECTO JRCH STREET, SUITE A ESBORO, TN 37130

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: JAMES ERIC BELL MGRM 01/24/2007