2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000005798

Entity Name: AMEDISYS HOSPICE, L.L.C.

FILED Mar 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5959 S SHERWOOD FOREST BOULEVARD BATON ROUGE, LA 70816

Current Mailing Address: New Mailing Address:

5959 S SHERWOOD FOREST BOULEVARD BATON ROUGE, LA 70816

FEI Number: 27-0678073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEADBEATHER, JOHN T

227 SOUTH CALHOUN STREET
TALLAHASSEE, FL 32301 US

CT CORPORATION
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: CT CORPORATION 03/06/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: PD (X) Change () Addition

Name: AMEDISYS, INC., Name: GRAHAM, LARRY

Address: 5959 S SHERWOOD FOREST BOULEVARD Address: 5959 S SHERWOOD FOREST BOULEVARD

City-St-Zip: BATON ROUGE, LA 70816 City-St-Zip: BATON ROUGE, LA 70816

Title: () Delete Title: VPD () Change (X) Addition

Name: Name: BORNE, WILIAM

Address: Address: 5959 S SHERWOOD FOREST BOULEVARD

City-St-Zip: City-St-Zip: BATON ROUGE, LA 70816

Name: SINN, SCOTT

Address: Address: 5959 S SHERWOOD FOREST BOULEVARD

City-St-Zip: City-St-Zip: BATON ROUGE, LA 70816

Title: () Delete Title: S () Change (X) Addition

Name: PEIFFER, CELESTE R

Address: Address: 5959 S SHERWOOD FOREST BOULEVARD

City-St-Zip: City-St-Zip: BATON ROUGE, LA 70816

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: CELESTE R PRIFFER S 03/06/2008