## 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M10000002321

Entity Name: CARESOUTH HHA HOLDINGS OF TALLAHASSEE, LLC

FILED Jan 04, 2011 Secretary of State

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

ONE TENTH STREET, SUITE 500 AUGUSTA, GA 309010103

Current Mailing Address: New Mailing Address:

ONE TENTH STREET, SUITE 500 PO BOX 200

AUGUSTA, GA 309010103 AUGUSTA, GA 309030200

FEI Number: 27-2515027 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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:

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR

Name: SOUTHERN, JOHN

Address: ONE TENTH STREET, SUITE 500 City-St-Zip: AUGUSTA, GA 309010103

Title: CFOT

Name: SOUTHERN, JOHN

Address: ONE TENTH STREET, SUITE 500 City-St-Zip: AUGUSTA, GA 309010103

Title: MGR

Name: GRIFFIN, RICK W

Address: ONE TENTH STREET, SUITE 500 City-St-Zip: AUGUSTA, GA 309010103

Title: CFOP

Name: GRIFFIN, RICK W

Address: ONE TENTH STREET, SUITE 500 City-St-Zip: AUGUSTA, GA 309010103

Title:

Name: GRIFFIN, RICK W

Address: ONE TENTH STREET, SUITE 500 City-St-Zip: AUGUSTA, GA 309010103

Title: MGR

Name: AHMED JUBEIR, MAHER
Address: ONE TENTH STREET, SUITE 500
City-St-Zip: AUGUSTA, GA 309010103

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 Statues.

SIGNATURE: JOHN M SOUTHERN MGR 01/04/2011

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