

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001286

Entity Name: ACS STATE HEALTHCARE, LLC

FILED
Apr 16, 2007
Secretary of State

Current Principal Place of Business:

9040 ROSWELL ROAD
SUITE 700
ATLANTA, GA 30350

New Principal Place of Business:

Current Mailing Address:

2828 N. HASKELL AVE., FL 10
DALLAS, TX 75204

New Mailing Address:

2828 N. HASKELL AVE
BLDG 1 FL 10
DALLAS, TX 75204

FEI Number: 58-2479287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MGR () Delete
Name: DECKELMAN, JR., WILLIAM L
Address: 2828 N HASKELL AVENUE, FL-10
City-St-Zip: DALLAS, TX 75204

Title: MGRM (X) Delete
Name: ACS ENTERPRISE SOLUT, IONS, INC.
Address: 2828 N HASKELL AVENUE, FL-10
City-St-Zip: DALLAS, TX 75204

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DECKELMAN, WILLIAM L JR
Address: 2828 N HASKELL AVENUE, FL-10
City-St-Zip: DALLAS, TX 75204

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM L DECKELMAN JR

MGRM

04/16/2007

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