

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000037422

Entity Name: LTS NURSING SERVICE, INC.

FILED
Mar 18, 2011
Secretary of State

Current Principal Place of Business:

8301 S.W. 57 STREET
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

8301 S.W. 57 STREET
DAVIE, FL 33328

New Mailing Address:

FEI Number: 65-1009147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUPLER, DAVID S
6950 CYPRESS ROAD
SUITE 101
PLANTATION, FL 33317 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

OFFICERS AND DIRECTORS:

Title: D
Name: SIMMONS, LINDA
Address: 8301 S.W. 57 STREET
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA T SIMMONS

PRES

03/18/2011

Electronic Signature of Signing Officer or Director

Date