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State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: $50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

**** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation		
147585	TLC Health Care Services,Inc		
3. Street Address Principal Business Office	City	State	Zip
1983 Marcus Avenue	Lake Success	NY	11042
4. Business Phone No.	5. State of Incorporation		
5163581000	Delaware		

6. Brief Description of the Character of Business Conducted in Rhode Island
Parent Company of Home Health Care Agency

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Street Address	City	State	Zip
Wesley N. Perry	1983 Marcus Avenue	Lake Success	NY	11042

Vice President Name	Street Address	City	State	Zip
Willard T. Derr	1983 Marcus Avenue	Lake Success	NY	11042

Secretary Name	Street Address	City	State	Zip
Willard T. Derr	1983 Marcus Avenue	Lake Success	NY	11042

Treasurer Name	Street Address	City	State	Zip
None				

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Street Address	City	State	Zip
Edward R. Casas,M.D.	1983 Marcus Avenue	Lake Success	NY	11042
Wesley N. Perry	1983 Marcus Avenue	Lake Success	NY	11042
Charles L. Griffith	1983 Marcus Avenue	Lake Success	NY	11042
Charles H. Ogburn	1983 Marcus Avenue	Lake Success	NY	11042

9. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000,000	Comm	$0.01 Par Value

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100,907	common	$0.01
	THIS SECTION MUST BE COMPLETED	

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

[redacted] [redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature *Date*

Wesley N. Perry
Print or Type Name

[redacted]
President
Title

File Date FILED
Check No. FEB 21 2008
By By 108979
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20950-12-237481

Form 630 Rev. 12/06