2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2008
Secretary of State

DOCUMENT# L06000035520

Entity Name: JUST LIKE FAMILY HOME CARE, LLC

Current Principal Place of Business:

2900 14TH STREET NORTH
SUITE 32
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

2900 14TH STREET NORTH
SUITE 32
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 20-4652933 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NASSBERG, JACOB
8145 SANCTUARY DRIVE
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

NASSBERG, JACOB
8279 VALIANT DRIVE
NAPLES, FL 34104 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: JACOB NASSBERG 02/08/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: NASSBERG, ELISABETH
Address: 8145 SANCTUARY DRIVE UNIT #2
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM ( ) Delete
Name: NASSBERG, JACOB
Address: 8145 SANCTUARY DRIVE UNIT #2
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM ( ) Delete
Name: STILLMAN, NIKOLE
Address: 8165 FLORIDA CLUB DRIVE #6309
City-St-Zip: NAPLES, FL 34112 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: NASSBERG, ELISABETH
Address: 8279 VALIANT DRIVE
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM (X) Change ( ) Addition
Name: NASSBERG, JACOB
Address: 8279 VALIANT DRIVE
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM (X) Change ( ) Addition
Name: STILLMAN, NIKOLE
Address: 8069 CHIANTI LANE
City-St-Zip: NAPLES, FL 34114 US

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: JACOB NASSBERG MGR 02/08/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date