

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000029979

**Entity Name:** AMERICA CARES, LLC

**Current Principal Place of Business:**

205 AIRPORT ROAD SOUTH  
NAPLES, FL 34104

**Current Mailing Address:**

205 AIRPORT ROAD SOUTH  
NAPLES, FL 34104

**FEI Number:** 26-2375349

**Certificate of Status Desired:** No

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

DIXON, C W  
752 CARIBBEAN CT  
MARIO ISLAND, FL 34145 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

**Authorized Person(s) Detail :**

Title MGRM  
Name DIXON, CHAD C  
Address 2313 KINGS LAKE BLVD  
City-State-Zip: NAPLES FL 34112

*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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHAD DIXON

**MANAGING MEMBER**

**04/26/2013**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date