

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000091341

**Entity Name:** SENIOR XPRESS CARE, LLC

**Current Principal Place of Business:**

5602 MARQUESAS CIRCLE  
101  
SARASOTA, FL 34233

**Current Mailing Address:**

5602 MARQUESAS CIRCLE  
101  
SARASOTA, FL 34233 US

**FEI Number:** 45-2947898

**Certificate of Status Desired:** No

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

MENDONCA, RENATA  
5602 MARQUESAS CIRCLE  
101  
SARASOTA, FL 34233 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 KELLEY, CHRISTOPHER J  
Address 5602 MARQUESAS CIRCLE  
101  
City-State-Zip: SARASOTA FL 34233

Title MGRM  
Name MENDONCA, RENATA L  
Address 5602 MARQUESAS CIRCLE  
101  
City-State-Zip: SARASOTA FL 34233

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

**SIGNATURE:** RENATA MENDONCA

**MANAGER**

**01/25/2016**

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

\_\_\_\_\_  
Date