

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000078329

Entity Name: SWEETMELISSA NURSING LLC

Current Principal Place of Business:

1336 CYPRESS COVE COURT
INVERNESS, FL 34450

Current Mailing Address:

1336 CYPRESS COVE COURT
INVERNESS, FL 34450 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENOIT, MELISSA D
1336 CYPRESS COVE COURT
INVERNESS, FL 34450 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 BENOIT, MELISSA D
Address 1336 CYPRESS COVE COURT
City-State-Zip: INVERNESS FL 34450

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: MELISSA D BENOIT

MGR

04/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date