

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # L00000012897

1. Entity Name

CHICAGO CARE NURSE STAFFING, L.L.C.



FILED

03 SEP 30 PM 3:58

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MJH

Principal Place of Business

2699 LEE ROAD, SUITE 412  
WINTER PARK FL 32789

Mailing Address

2699 LEE ROAD, SUITE 412  
WINTER PARK FL 32789

2. Principal Place of Business

14078 Lake Price Drive  
Suite, Apt. #, etc.

3. Mailing Address

14078 Lake Price Drive  
Suite, Apt. #, etc.

City & State  
Orlando Florida

Zip  
32806

Country  
USA

City & State  
Orlando Florida

Zip  
32806

Country  
USA

9/30

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3681005

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MILLER & SOUTH, P.A.  
JEFFREY P. MILHAUSEN, ESQ.  
2699 LEE RD., STE. 120  
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By September 24, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
STEPHENS, JOHN W  
14078 LAKE PRICE DR.  
ORLANDO FL 32826 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Member "MGR"  
Aaron Schwartz #187  
5609 Century Twenty One Blvd  
Orlando Florida 32807 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Member "MGR"  
Joshua G. Zayas  
1660 Chatham Circle  
Apopka, Florida 32703 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Member "MGR"  
Aaron Schwartz  
5609 Century Twenty One Blvd #187  
Orlando Florida 32807 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Member "MGR"  
Joshua G. Zayas  
1660 Chatham Circle  
Apopka, Florida 32703 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
000023445210  
09/30/03--01054--012 \*\*50.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

*John W. Stephens*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

9/24/2003 (407) 739-5517  
Date Daytime Phone #

CR2E083 (4/03)