

2002 UNIFORM BUSINESS REPORT (UBR)

3)
FILED
Apr 18, 2002 8:00 am
Secretary of State

03-14-2002 90083 005 ****55.00

DOCUMENT # L01000008738
1. Entity Name
LTC ADVANTAGE, LLC

Principal Place of Business 911 CHESTNUT STREET CLEARWATER FL 33756	Mailing Address 911 CHESTNUT STREET CLEARWATER FL 33756
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2. Principal Place of Business 84 Sagamore Terrace Road Suite, Apt. #, etc.	3. Mailing Address 84 Sagamore Terrace Road Suite, Apt. #, etc.
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City & State Westbrook, Connecticut Zip 06498 Country US	City & State Westbrook, Connecticut Zip 06498 Country US
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4. FEI Number 59-3723419	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	



DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent BOKOR, BRUCE H 911 CHESTNUT STREET CLEARWATER FL 33756	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOKOR, BRUCE H 911 CHESTNUT STREET CLEARWATER FL 33756 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR / VICE PRESIDENT Stratidis, Anthony 84 Sagamore Terrace Road Westbrook, Connecticut 06498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Cunningham, Tim 84 Sagamore Terrace Road Westbrook, Connecticut 06498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member VICE PRESIDENT Hicks, Garry 84 Sagamore Terrace Rd. Post Office Box 2488 Westbrook, CT Brendon, Florida 33509 06498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member CHIEF FINANCIAL OFFICER Walker, Tom 84 Sagamore Terrace Road Westbrook, Connecticut 06498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: [Signature] **REQUIRED** Date: 01/21/02 860-399-1838

SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (8/01)