

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013186

FILED
Jun 15, 2009
Secretary of State

Entity Name: DISABILITY CARE OF FLORIDA, L.L.C.

Current Principal Place of Business:

20415 LAKE PATIENCE RD.
LAND O' LAKES, FL 34638 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 647
LAND O' LAKES, FL 34639 US

New Mailing Address:

FEI Number: 59-3733456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ARCHULETA, CHARLES
30835 ELOIAN DRIVE
WESLEY CHAPEL, FL 33544 US

Name and Address of New Registered Agent:

ARCHULETA, CHARLES B MR.
30835 ELOIAN DRIVE
WESLEY CHAPEL, FL 33544 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: CHARLES B. ARCHULETA

06/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOORMAN, EILEEN
Address: 20415 LAKE PATIENCE RD.
City-St-Zip: LAND O LAKES, FL 34638 US

Title: MGRM () Delete
Name: TIANI, JAMUS
Address: 5130 BAYBERRY DRIVE
City-St-Zip: CUMMING, GA 30040 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MOORMAN, EILEEN R MS.
Address: 20415 LAKE PATIENCE RD.
City-St-Zip: LAND O LAKES, FL 34638 US

Title: MGRM (X) Change () Addition
Name: TIANI, JAMUS J MR.
Address: 5130 BAYBERRY DRIVE
City-St-Zip: CUMMING, GA 30040 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: EILEEN R. MOORMAN

MS.

06/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date