

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000015402

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** CARING WAY PROPERTIES, LLC

**Current Principal Place of Business:**

4161 TAMIAMI TRAIL, SUITE 501  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

201 W. MARION AVE., SUITE 1204  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

4161 TAMIAMI TRAIL, SUITE 501  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

201 W. MARION AVE., SUITE 1204  
PUNTA GORDA, FL 33950

**FEI Number:** 65-1138632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CROSLAND, BRIAN W  
4161 TAMIAMI TRAIL, SUITE 501  
PORT CHARLOTTE, FL 33952 US

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

CROSLAND, BRIAN W  
201 W. MARION AVE., SUITE 1204  
PUNTA GORDA, FL 33950 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:** BRIAN W. CROSLAND

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** CROSLAND, BRIAN W  
**Address:** 201 W. MARION AVE., SUITE 1204  
**City-St-Zip:** PUNTA GORDA, FL 33950

**Title:** MGRM  
**Name:** JOINER, J. SCOTT  
**Address:** 701 JC CENTER CT SUITE 7  
**City-St-Zip:** PORT CHARLOTTE, FL 33954

I hereby 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:** BRIAN W. CROSLAND

MGRM

01/04/2012

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