

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000048196

Entity Name: EDUCARE L.L.C.

**FILED**  
**May 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8712 LEE VISTA BLVD  
ORLANDO, FL 32829 US

**New Principal Place of Business:**

**Current Mailing Address:**

8712 LEE VISTA BLVD  
ORLANDO, FL 32829 US

**New Mailing Address:**

FEI Number: 57-1208736

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LUND, JOHN T  
8712 LEE VISTA BLVD  
ORLANDO, FL 32829 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LUND, JOHN  
Address: 14438 CALABAY CT.  
City-St-Zip: ORLANDO, FL US

Title: MGRM  
Name: LUND, JELAIN  
Address: 14438 CALABAY CT.  
City-St-Zip: ORLANDO, FL US

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: JOHN LUND

MGRM

05/17/2011

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