## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000068691

Entity Name: CARE MANAGERS LLC

Address:

City-St-Zip:

181 OAK GROVE LANE

MERRITT ISLAND, FL 32952

FILED Jan 28, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 181 OAK GROVE LANE MERRITT ISLAND, FL 32952 **Current Mailing Address: New Mailing Address:** 181 OAK GROVE LANE MERRITT ISLAND, FL 32952 FEI Number: 59-3785876 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RUSSO, ALAN M 181 OAK GROVE LN MERRITT ISLAND, FL 32952 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition RUSSO, ALAN M Name: Name: Address: 181 OAK GROVE LANE Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: RUSSO, JOANNE M Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAN M. RUSSO MGRM 01/28/2007