

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096629

FILED
Apr 19, 2010
Secretary of State

Entity Name: COUNSELING & CONSULTING WITH CARE, LLC

Current Principal Place of Business:

6427 NW 81ST BLVD.
GAINESVILLE, FL 32653

New Principal Place of Business:

4814 NW 44TH AVE, APT 101
GAINESVILLE, FL 32606

Current Mailing Address:

6427 NW 81ST BLVD.
GAINESVILLE, FL 32653

New Mailing Address:

4814 NW 44TH AVE, APT 101
GAINESVILLE, FL 32606

FEI Number: 20-1203150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 CORAL WAY
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

CHARLES, NORMA J PSY.D.
4814 NW 44TH AVE, APT 101
GAINESVILLE, FL 32606 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: NORMA J CHARLES, PSY.D.

04/19/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: CHARLES, NORMA J PSY.D.
Address: 4814 NW 44TH AVE, APT 101
City-St-Zip: GAINESVILLE, FL 32606

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: NORMA J CHARLES

MGR

04/19/2010

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