

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029580

Entity Name: INFINITY HOME CARE, L.L.C.

FILED
Mar 23, 2012
Secretary of State

Current Principal Place of Business:

2201 CANTU COURT
SUITE 116
SARASOTA, FL 34232

New Principal Place of Business:

6700 PROFESSIONAL PARKWAY WEST
SARASOTA, FL 34240

Current Mailing Address:

2201 CANTU COURT
SUITE 116
SARASOTA, FL 34232

New Mailing Address:

6700 PROFESSIONAL PARKWAY WEST
SARASOTA, FL 34240

FEI Number: 20-4540750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOXLEY, R. ROBERT
2201 CANTU COURT
SUITE 116
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

MOXLEY, R. ROBERT
6700 PROFESSIONAL PARKWAY WEST
SARASOTA, FL 34240 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: R. ROBERT MOXLEY

03/23/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MOXLEY, R. ROBERT
Address: 6700 PROFESSIONAL PARKWAY WEST
City-St-Zip: SARASOTA, FL 34240

Title: MGR
Name: JOSEPHSON, TODD H
Address: 6700 PROFESSIONAL PARKWAY WEST
City-St-Zip: SARASOTA, FL 34240

Title: MGR
Name: DINGLE, PHILLIP S
Address: 6700 PROFESSIONAL PARKWAY WEST
City-St-Zip: SARASOTA, FL 34240

Title: MGR
Name: ANDERSON, BRIAN W
Address: 6700 PROFESSIONAL PARKWAY WEST
City-St-Zip: SARASOTA, FL 34240

Title: MGR
Name: THOMPSON, JEFFERY
Address: 6700 PROFESSIONAL PARKWAY WEST
City-St-Zip: SARASOTA, FL 34240

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: R. ROBERT MOXLEY

MGR

03/23/2012

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