2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 29, 2012
Secretary of State

DOCUMENT# L06000031517

Entity Name: MONTILLA FAMILY DAY CARE LLC

Current Principal Place of Business:

5824 NW BATES AVE
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

5824 NW BATES AVE
PORT ST. LUCIE, FL 34986

New Mailing Address:

FEI Number: 20-4604674 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONTILLA, AMALIA R
5824 NW BATES AVE
PORT ST. LUCIE, FL 34986 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: MGR
Name: MONTILLA, AMALIA R
Address: 5824 NW BATES AVE
City-St-Zip: PORT ST. LUCIE, FL 34986 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 Statues.

SIGNATURE: AMALIA R MONTILLA MGR 01/29/2012

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