2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# L06000034388

Entity Name: CARING PARTNERS HOME CARE AGENCY, LLC

Current Principal Place of Business:

8890 W OAKLAND PARK BLVD, STE 200
SUNRISE, FL 33351

New Principal Place of Business:

8890 W OAKLAND PARK BLVD
STE 200
SUNRISE, FL 33351

Current Mailing Address:

8890 W OAKLAND PARK BLVD, STE 200
SUNRISE, FL 33351

New Mailing Address:

8890 W OAKLAND PARK BLVD
STE 200
SUNRISE, FL 33351

FEI Number: 20-4616243 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATTERSON, MAUREEN
3846 W GARDENIA AVE
WESTON, FL 33332 US

Name and Address of New Registered Agent:

PATTERSON, MAUREEN
1423 CAPRI LANE
APT 3901
WESTON, FL 33326 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: _____ 01/05/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: PATTERSON, MAUREEN
Address: 8890 W OAKLAND PARK BLVD SUITE 200
City-St-Zip: SUNRISE, FL 33351

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: MAUREEN PATTERSON MGR 01/05/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date