

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000035520

FILED
Apr 20, 2007
Secretary of State

Entity Name: JUST LIKE FAMILY HOME CARE, LLC

Current Principal Place of Business:

2900 14TH STREET NORTH
SUITE 26
NAPLES, FL 34103 US

New Principal Place of Business:

2900 14TH STREET NORTH
SUITE 32
NAPLES, FL 34103 US

Current Mailing Address:

2900 14TH STREET NORTH
SUITE 26
NAPLES, FL 34103 US

New Mailing Address:

2900 14TH STREET NORTH
SUITE 32
NAPLES, FL 34103 US

FEI Number: 20-4652933

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

NASSBERG, JACOB
8145 SANCTUARY DRIVE
NAPLES, FL 34104 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: ELISABETH NASSBERG

04/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NASSBERG, ELISABETH
Address: 8145 SANCTUARY DRIVE UNIT #2
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM () Delete
Name: NASSBERG, JACOB
Address: 8145 SANCTUARY DRIVE UNIT #2
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM () Delete
Name: STILLMAN, NIKOLE
Address: 8165 FLORIDA CLUB DRIVE #6309
City-St-Zip: NAPLES, FL 34112 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: ELISABETH NASSBERG

MGR

04/20/2007

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