

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047432

FILED
Jan 11, 2011
Secretary of State

Entity Name: A COMPASSIONATE CARE GIVER LLC

Current Principal Place of Business:

803 3RD AVE N
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

803 3RD AVE N
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

FEI Number: 20-4836549 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MANCUSO, JOAN
803 3RD AVE N
JACKSONVILLE BEACH, FL 32250 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: PS
Name: MANCUSO, JOAN A
Address: 803 3RD AVE N
City-St-Zip: JACKSONVILLE BEACH, FL 32250 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 Statutes.

SIGNATURE: JOAN MANCUSO

P

01/11/2011

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