# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000103783

Entity Name: INFINITY HOME CARE OF LAKELAND, LLC

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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8790 WILD DUNES DRIVE 2201 CANTU CT. SARASOTA, FL 34241 SUITE #116

SARASOTA, FL 34232

**Current Mailing Address:** New Mailing Address:

2201 CANTU CT. 8790 WILD DUNES DRIVE SARASOTA, FL 34241 SUITE #116 SARASOTA, FL 34232

FEI Number: 20-5782871 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

#### Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOXLEY, R. ROBERT 8790 WILD DUNES DRIVE SARASOTA, FL 34241

MOXLEY, R. ROBERT 2201 CANTU CT SUITE #116 SARASOTA, FL 34232 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: 04/24/2009

> Electronic Signature of Registered Agent Date

### MANAGING MEMBERS/MANAGERS:

MGRM ( ) Delete MARS, LLC Name: Address: 1776 RINGLING BLVD. City-St-Zip: SARASOTA, FL 34236

Title: ( ) Delete Name: Address: City-St-Zip:

Title: () Delete

Address:

City-St-Zip:

Name:

## ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition INFINITY HOME CARE, LLC Name: Address: 2201 CANTU CT. SUITE #116 City-St-Zip: SARASOTA, FL 34232

Title: ( ) Change (X) Addition JOSEPHSON, TODD H Name: Address: 2201 CANTU CT. SUITE #116 City-St-Zip: SARASOTA, FL 34232

Title: MGRM ( ) Change (X) Addition MOXLEY, R. ROBERT Name: 2201 CANTU CT. SUITE #116 Address: City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify 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: TODD JOSEPHSON **MGRM** 04/24/2009