

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000081059

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** ACHIEVE HOME CARE, LLC

**Current Principal Place of Business:**

11329 COUNTRYWAY BOULEVARD  
TAMPA, FL 33626

**New Principal Place of Business:**

11016 N. DALE MABRY HWY  
STE. 201  
TAMPA, FL 33618 US

**Current Mailing Address:**

11329 COUNTRYWAY BOULEVARD  
TAMPA, FL 33626

**New Mailing Address:**

11016 N. DALE MABRY HWY  
STE. 201  
TAMPA, FL 33618 US

**FEI Number:** 26-0750153

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALTERS, DOUGLAS C  
1801 NORTH BELCHER ROAD  
CLEARWATER, FL 33765 US

**Name and Address of New Registered Agent:**

TAMMY, KING  
5820 MARINER ST  
TAMPA, FL 33609 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: TAMMY KING

04/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KING, TAMMY E  
Address: 11016 N. DALE MABRY HWY STE 201  
City-St-Zip: TAMPA, FL 33618 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: TAMMY KING

MGR

04/12/2012

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