

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082255

FILED
Apr 13, 2009
Secretary of State

Entity Name: FAMILY CARE MAINTENANCE LLC

Current Principal Place of Business:

8202 WILES ROAD, SUITE 131
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

Current Mailing Address:

8202 WILES ROAD, SUITE 131
CORAL SPRINGS, FL 33067 US

New Mailing Address:

FEI Number: 26-0729190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENIDGE, RAWLE
8202 WILES RD STE 121
CORAL GABLES, FL 33067 US

Name and Address of New Registered Agent:

GREENIDGE, RAWLE
8202 WILES RD STE 121
CORAL SPRINGS, FL 33067 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: RAWLE GREENIDGE

04/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GREENIDGE, RAWLE
Address: 8202 WILES ROAD, SUITE 131
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: MGR () Delete
Name: RAMSEY, KAY
Address: 8202 WILES ROAD, SUITE 131
City-St-Zip: CORAL SPRINGS, FL 33067 US

ADDITIONS/CHANGES:

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 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: KAY RAMSEY

MGR

04/13/2009

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