2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# L07000092414

Entity Name: HOME CARETAKER, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
12 SELKIRK PLACE PALM COAST, FL 32164 US	

Current Mailing Address:	**New Mailing Address:**
12 SELKIRK PLACE PALM COAST, FL 32164 US	

FEI Number: 26-0870559   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:**
COPPOLA, MARK 12 SELKIRK PLACE PALM COAST, FL 32164 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: _____

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	COPPOLA, MARK	Name:	
Address:	12 SELKIRK PLACE	Address:	
City-St-Zip:	PALM COAST, FL 32164 US	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	FAY, JAMES	Name:	
Address:	12 SELKIRK PLACE	Address:	
City-St-Zip:	PALM COAST, FL 32164	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MCKINLEY, PETER	Name:	
Address:	1000 CINNAMON BEACH WAY, 935	Address:	
City-St-Zip:	PALM COAST, FL 32137	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	LITTEKEN, GEORGE	Name:	
Address:	1000 CINNAMON BEACH WAY, 935	Address:	
City-St-Zip:	PALM COAST, FL 32137	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: MARK COPPOLA   MGRM   01/15/2009
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date