

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000003530

Entity Name: LB CARE, LLC

FILED
Feb 15, 2010
Secretary of State

Current Principal Place of Business:

5650 ALMAR DRIVE
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

Current Mailing Address:

5650 ALMAR DRIVE
PUNTA GORDA, FL 33950 US

New Mailing Address:

FEI Number: 26-1719436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERSON, CECIL T
5650 ALMAR DRIVE
PUNTA GORDA, FL 33950 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: MGRM
Name: BERSON, CECIL T
Address: 5650 ALMAR DRIVE
City-St-Zip: PUNTA GORDA, FL 33950 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: CECIL T. BERSON

MGRM

02/15/2010

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