

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000003848

FILED
Feb 05, 2009
Secretary of State

Entity Name: F&G PROFESSIONAL CARE COORDINATORS, LLC

Current Principal Place of Business:

3458 PACES FERRY RD
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

3458 PACES FERRY RD
TALLAHASSEE, FL 32309

New Mailing Address:

2910 KERRY FOREST PKWY D4-188
TALLAHASSEE, FL 32309

FEI Number: 26-1781505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FANCY, JEAN
3458 PACES FERRY RD
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

FANCY, JEAN MGRM
3458 PACES FERRY RD
TALLAHASSEE, FL 32309 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: JEAN FANCY

02/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FANCY, JEAN
Address: 3458 PACES FERRY RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM () Delete
Name: GEROLD, JEAN
Address: 3045 HARPERS FERRY DR
City-St-Zip: TALLAHASSEE, FL 32308

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: JEAN GEROLD

MGRM

02/05/2009

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