

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000010419

FILED  
Apr 19, 2009  
Secretary of State

Entity Name: PLATINUM CARE CONCIERGE, LLC

**Current Principal Place of Business:**

3488 BEEKMAN PLACE  
SARASOTA, FL 34235 US

**New Principal Place of Business:**

**Current Mailing Address:**

3488 BEEKMAN PLACE  
SARASOTA, FL 34235 US

**New Mailing Address:**

FEI Number: 26-1896841

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

MILLS, BRIAN A  
3488 BEEKMAN PLACE  
SARASOTA, FL 34235 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: BRIAN A MILLS

04/19/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MILLS, BRIAN A  
Address: 3488 BEEKMAN PLACE  
City-St-Zip: SARASOTA, FL 34235 US

Title: MGRM ( ) Delete  
Name: EASTMAN, TERRY A  
Address: 6627 MEANDERING WAY  
City-St-Zip: BRANDENTON, FL 34202 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: BRIAN A MILLS

MGRM

04/19/2009

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