

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000032519

Entity Name: TAKE CARE ADVISOR, LLC

FILED  
Apr 03, 2012  
Secretary of State

**Current Principal Place of Business:**

3920 BEE RIDGE ROAD  
BUILDING D, SUITE 101  
SARASOTA, FL 34233

**New Principal Place of Business:**

3982 BEE RIDGE ROAD  
BUILDING H, SUITE L  
SARASOTA, FL 34233

**Current Mailing Address:**

3920 BEE RIDGE ROAD  
BUILDING D, SUITE 101  
SARASOTA, FL 34233

**New Mailing Address:**

3982 BEE RIDGE ROAD  
BUILDING H, SUITE L  
SARASOTA, FL 34233

FEI Number: 65-0554399

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WISE, SUSANNE S  
3982 BEE RIDGE ROAD  
BUILDING H, SUITE A  
SARASOTA, FL 34233 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: MGR  
Name: WISE, SUSANNE S  
Address: 3982 BEE RIDGE ROAD, BUILDING H SUITE A  
City-St-Zip: SARASOTA, FL 34233

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: SUSANNE S. WISE

MGR

04/03/2012

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