

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000043139

FILED
Feb 17, 2009
Secretary of State

Entity Name: SENIOR CARE CONSULTANTS, PL

Current Principal Place of Business:

12625 OXNARD STREET
NORTH HOLLYWOOD, CA 91606 US

New Principal Place of Business:

19830 NW 2ND STREET
PEMBROKE PINES, FL 33029 US

Current Mailing Address:

12625 OXNARD STREET
NORTH HOLLYWOOD, CA 91606 US

New Mailing Address:

19830 NW 2ND STREET
PEMBROKE PINES, FL 33029 US

FEI Number: 26-2532706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD.
SUITE A-100
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

FORDE, ESAN N MGRM
19830 NW 2ND STREET
PEMBROKE PINES, FL 33029 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: ESAN N FORDE

02/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FORDE, ESAN
Address: 12625 OXNARD STREET
City-St-Zip: NORTH HOLLYWOOD, CA 91606 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FORDE, ESAN N MGRM
Address: 19830 NW 2ND STREET
City-St-Zip: PEMBROKE PINES, FL 33029 US

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: ESAN N FORDE

MGRM

02/17/2009

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