2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2011
Secretary of State

DOCUMENT# L08000092126

Entity Name: FLORIDA CARE MANAGEMENT LLC

Current Principal Place of Business:

2364 OTHELLO CT
THE VILLAGES, FL 32162

New Principal Place of Business:

Current Mailing Address:

2364 OTHELLO CT
THE VILLAGES, FL 32162

New Mailing Address:

FEI Number: 80-0273070 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, SHERYL M PRES
2364 OTHELLO CT
THE VILLAGES, FL 32162 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: PRES
Name: COHEN, SHERYL
Address: 2364 OTHELLO CT
City-St-Zip: THE VILLAGES, FL 32162

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 Statues.

SIGNATURE: SHERYL COHEN PRES 02/13/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date