

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092126

FILED
Jan 21, 2012
Secretary of State

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 Statutes.

SIGNATURE: SHERYL COHEN

PRES

01/21/2012

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