

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000016715

FILED
Mar 29, 2011
Secretary of State

Entity Name: STANLEY FAMILY DAY CARE HOME, LLC

Current Principal Place of Business:

5418 CLAREDON CT
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

5418 CLAREDON CT
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 26-4246855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANLEY, KIM
5418 CLAREDON CT
TALLAHASSEE, FL 32303 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: STANLEY, KIM
Address: 5418 CLAREDON CT
City-St-Zip: TALLAHASSEE, FL 32303

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: KIM STSNLEY

MGR

03/29/2011

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