

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000035524

**FILED**  
**May 07, 2010**  
**Secretary of State**

**Entity Name:** TALABERA FAMILY DAYCARE, LLC

**Current Principal Place of Business:**

113 HAROLD AVENUE SOUTH  
LEHIGH ACRES, FL 33973

**New Principal Place of Business:**

**Current Mailing Address:**

113 HAROLD AVENUE SOUTH  
LEHIGH ACRES, FL 33973

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

ADAMCZYK, MARK E ESQ  
5801 PELICAN BAY BLVD  
103  
NAPLES, FL 34108 US

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

MERED, ANA  
113 HAROLD AVENUE SOUTH  
LEHIGH ACRES, FL 33973 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: ANA E. MERCED

05/07/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MERCED, ANA I  
Address: 113 HAROLD AVENUE SOUTH  
City-St-Zip: LEHIGH ACRES, FL 33973

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: ANA E. MERCED

MGR

05/07/2010

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