

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000051115

FILED
Apr 12, 2011
Secretary of State

Entity Name: ACTIVE ADULT DAY CARE CENTER, LLC

Current Principal Place of Business:

1470 NW 36 ST
MIAMI, FL 33142

New Principal Place of Business:

1470 NW 36 ST
MIAMI, FL 33142 US

Current Mailing Address:

8390 SW 5 ST
MIAMI, FL 33144

New Mailing Address:

8390 SW 5 ST
MIAMI, FL 33144 US

FEI Number: 94-3483843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PILOTO, JULIO
8390 SW 5 STREET
MIAMI, FL 33144 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: MGRM
Name: PILOTO, JULIO
Address: 8390 SW 5 ST
City-St-Zip: MIAMI, FL 33144 US

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: JULIO PILOTO

MGRM

04/12/2011

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