

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000052291

FILED
Apr 08, 2011
Secretary of State

Entity Name: INDEPENDANT CARE OF DOVER LLC

Current Principal Place of Business:

2815 DURANT TRAILS BLVD
DOVER, FL 33527 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 185
DURANT, FL 33530 US

New Mailing Address:

FEI Number: 27-0237853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, MORRIS
2815 DURANT TRAILS
DOVER, FL 33527 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: JONES, MORRIS
Address: PO BOX 185
City-St-Zip: DURANT, FL 33530 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: MORRIS JONES

MGR

04/08/2011

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