

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000026743

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** TOTAL CARE DIABETES, LLC

**Current Principal Place of Business:**

3720 CURTIS BLVD SUITE 102  
COCOA, FL 32927

**New Principal Place of Business:**

**Current Mailing Address:**

3720 CURTIS BLVD SUITE 102  
COCOA, FL 32927

**New Mailing Address:**

**FEI Number:** 27-2398277

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CB&G SERVICES, INC.  
283 CRANES ROOST BLVD STE 165  
ALTAMONTE SPRINGS, FL 32701 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:** MYERS, LINDA  
**Address:** 7190 HARTMAN ST  
**City-St-Zip:** COCOA, FL 32927

**Title:** MGRM  
**Name:** VEAUDRY, SUSAN  
**Address:** 1390 KILLEARN DR  
**City-St-Zip:** TITUSVILLE, FL 32780

**Title:** MGRM  
**Name:** GANEM, JOSEPH  
**Address:** 156 BELLEAIRE DRIVE  
**City-St-Zip:** PALM COAST, FL 32137

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:** LINDA MYERS

MGR

03/22/2012

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