

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000072376

Entity Name: L 7 HOME CARE OPERATIONS LLC

FILED
Apr 27, 2011
Secretary of State

Current Principal Place of Business:

7550 MISSION HILLS DR
UNIT 306-108
NAPLES, FL 34119

New Principal Place of Business:

7550 MISSION HILLS DR
UNIT 306-56
NAPLES, FL 34119

Current Mailing Address:

PO BOX 367643
BONITA SPRINGS, FL 34136

New Mailing Address:

7550 MISSION HILLS DR
UNIT 306-56
NAPLES, FL 34119

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CULP, SAMUEL R
PO BOX 367643
BONITA SPRINGS, FL 34136 US

Name and Address of New Registered Agent:

CULP, SAMUEL R
7550 MISSION HILLS DR
UNIT 306-56
NAPLES, FL 34119 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: SAMUEL R CULP

04/27/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: CULP, SAMUEL R
Address: 7550 MISSION HILLS DR #306-56
City-St-Zip: NAPLES, FL 34119

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: SAMUEL R CULP

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04/27/2011

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