

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000098172

**FILED**  
**Jun 07, 2011**  
**Secretary of State**

**Entity Name:** FOCUS CUSTOMER CARE, LLC

**Current Principal Place of Business:**

2338 IMMOKALEE RD  
300  
NAPLES, FL 34110

**New Principal Place of Business:**

7150 114TH AVENUE  
SUITE 100  
LARGO, FL 33773

**Current Mailing Address:**

2338 IMMOKALEE RD  
300  
NAPLES, FL 34110

**New Mailing Address:**

2338 IMMOKALEE ROAD  
#300  
NAPLES, FL 34110

**FEI Number:** 27-3596050

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WHITED, CLAUDE O  
401 EAST VIRGINIA  
THE CHESLEY HOUSE  
TALLAHASSEE, FL 32301 US

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

MCQUILLAN & COMPANY, LLC  
1311 S. HOWARD AVENUE  
TAMPA, FL 33606 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: DUSTIN W. MCQUILLAN

06/07/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TEWIS, ANGELA N  
Address: 2338 IMMOKALEE ROAD #300  
City-St-Zip: NAPLES, FL 34110

Title: MGR  
Name: TEWIS, RYAN E  
Address: 2338 IMMOKALEE ROAD #300  
City-St-Zip: NAPLES, FL 34110

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: ANGELA N TEWIS

MGRM

06/07/2011

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