

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000098345

FILED
Jan 09, 2012
Secretary of State

Entity Name: SONSHINE ELDER CARE, LLC

Current Principal Place of Business:

5650 W. SHORE DR.
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 37325
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 94-3841717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIRON, STACI L
5650 W. SHORE DR.
PENSACOLA, FL 32526 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: OWNE
Name: MIRON, STACI L
Address: 5650 W SHORE DR
City-St-Zip: PENSACOLA, FL 32526

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: STACI MIRON

OWNE

01/09/2012

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