

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109593

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** ORANGE PARK ADULT DAYCARE, L.L.C.

**Current Principal Place of Business:**

409 GANO AVENUE  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

530 MADEIRA DRIVE  
ORANGE PARK, FL 32073

**Current Mailing Address:**

P.O. BOX 278  
ORANGE PARK, FL 32067

**New Mailing Address:**

FEI Number: 80-0652154

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSON, RICHARD  
530 MADERIA DRIVE  
ORANGE PARK, FL 32073 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: ROBINSON, RENEE  
Address: P.O. BOX 278  
City-St-Zip: ORANGE PARK, FL 32067

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: RENEE ROBINSON

MGR

03/02/2011

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