

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000113763

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** THE CARING COMPANY, LLC

**Current Principal Place of Business:**

5811 SOUTH DALE MABRY HWY  
PMB D9  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

5811 SOUTH DALE MABRY HWY  
PMB D9  
TAMPA, FL 33611

**New Mailing Address:**

**FEI Number:** 27-3931794

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLMER, GARY M JR.  
4609 WEST BRADLEY ST.  
TAMPA, FL 33616 US

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

HOLMER, GARY M JR.  
505 S. WESTLAND AVE  
C  
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: GMH

01/19/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HOLMER, GARY M JR.  
Address: 4609 WEST BRADLEY ST.  
City-St-Zip: TAMPA, FL 33616

Title: MGRM  
Name: RICHICHI, JASON D  
Address: 2316 PINE RIDGE RD PMB 358  
City-St-Zip: NAPLES, FL 34109

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: GARY HOLMER

MGRM

01/19/2012

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