2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2012
Secretary of State

DOCUMENT# L11000060963

Entity Name: ACORN ELDER CARE LLC

Current Principal Place of Business:

615 S.W. SAINT LUCIE CRESCENT, STE 106
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

615 S.W. SAINT LUCIE CRESCENT, STE 106
STUART, FL 34994

New Mailing Address:

FEI Number: 27-0922716 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PORTER, JANET KIGHT
615 S.W. SAINT LUCIE CRESCENT, STE 106
STUART, FL 34994 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: PORTER, JANET KIGHT
Address: 615 S.W. SAINT LUCIE CRESCENT, STE 106
City-St-Zip: STUART, FL 34994

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 Statues.

SIGNATURE: JANET KIGHT PORTER MGR 04/11/2012

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