

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000072806

FILED
Jan 05, 2012
Secretary of State

Entity Name: SAFE AND SECURE HOME CARE, LLC

Current Principal Place of Business:

405 PARSON BROWN WAY
LONGWOOD, FL 32750 US

New Principal Place of Business:

2468 US HIGHWAY 441/27
SUITE 501
FRUITLAND PARK, FL 34731 US

Current Mailing Address:

405 PARSON BROWN WAY
LONGWOOD, FL 32750 US

New Mailing Address:

2468 US HIGHWAY 441/27
SUITE 501
FRUITLAND PARK, FL 34731 US

FEI Number: 45-3080261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAPIDUS, BRIAN
405 PARSON BROWN WAY
LONGWOOD, FL 32750 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: MGRM
Name: LAPIDUS, BRIAN J
Address: 405 PARSON BROWN WAY
City-St-Zip: LONGWOOD, FL 32750 US

Title: MGRM
Name: LAPIDUS, KELLY E
Address: 405 PARSON BROWN WAY
City-St-Zip: LONGWOOD, FL 32750 US

Title: MGRM
Name: MOORE, RICK
Address: 37507 LEONTINE WILLIAMS ROAD
City-St-Zip: LEESBURG, FL 34788 US

Title: MGRM
Name: MOORE, TERESA L
Address: 37507 LEONTINE WILLIAMS ROAD
City-St-Zip: LEESBURG, FL 34788 US

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: BRIAN LAPIDUS

MGRM

01/05/2012

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