

2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000090814

FILED
Aug 17, 2012
Secretary of State

Entity Name: ADULT CARE & RESPITE OF AMERICA, LLC

Current Principal Place of Business:

175 1ST ST. SOUTH
SUITE 505
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

175 1ST ST. SOUTH
SUITE 505
ST. PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: 45-2924778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

HOPKINS, GAVIN J
175 1ST ST. SOUTH
SUITE 505
ST. PETERSBURG, FL 33701 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: GAVIN J. HOPKINS

08/17/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: HOPKINS, GAVIN J
Address: 175 1ST ST. SOUTH STE 505
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: MGR
Name: PINO, SCOTT A
Address: 175 1ST ST. SOUTH STE 505
City-St-Zip: ST. PETERSBURG, FL 33701 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: GAVIN J. HOPKINS

MGR

08/17/2012

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