

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000129707

Entity Name: FAMILY CARE RX, LLC

FILED
Apr 16, 2012
Secretary of State

Current Principal Place of Business:

4752 JOG ROAD
GREENACRES, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

4752 JOG ROAD
GREENACRES, FL 33467 US

New Mailing Address:

FEI Number: 45-3820942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AXTELL, MARK
4752 JOG ROAD
GREENACRES, FL 33467 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: WILLIAMS, BRADLEY
Address: 1416 LAKE BASS DRIVE
City-St-Zip: LAKE WORTH, FL 33461 US

Title: MGRM
Name: AXTELL, MARK
Address: 1223 CREEKSIDE DRIVE
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGRM
Name: WILLIAMS, MICHELE
Address: 1416 LAKE BASS DRIVE
City-St-Zip: LAKE WORTH, FL 33461 US

Title: MGRM
Name: AXTELL, SAMANTHA
Address: 1223 CREEKSIDE DRIVE
City-St-Zip: WELLINGTON, FL 33414 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: MARK AXTELL

MRGM

04/16/2012

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