## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9900005906  1. Entity Name SARASOTA CARE, LLC					]	ru FN	i			
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Principal Place of Business Mailing Address					<b>-</b>	SECRETARY OF ALLAHASSEE F	STATE			
4783 FRUITVILI SARASOTA FL	··•	111 WEST MICHIGAN STE MILWAUKEE WI 53203	West Michigan Street Walikee Wi 53203			ALLAHASSEE F	Collins			
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3 Principal Pl	and of Rusiness	3. Mailing Address			_					
2. Principal Place of Business						1				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State	City & State			Number <b>36-4321</b> 3	70		plied For t Applicable	
Zip	Country	Zip	Coun	try	5. Certi	ficate of Status Desired		55.00 Add	itional	
<del></del>	6. Name and Address of Current	Registered Agent	1		7. Nam	e and Address of New		<del> </del>		
1 F3.0	O DOOLINGHT OFFICE INC			Name						
	IS DOCUMENT SERVICES, INC. 3 WW KELLEY RD.		Street		(P.O. Box I	Number is Not Acceptab	le)			
TALI	LAHASSEE FL 32311									
				City			FL	Zip Code	•	
8. The above	named entity submits this statement fo	r the purpose of changing its	s registere	ed office or regist	ered agent,	or both, in the State of F	lorida.			
SIGNATURE _							<u>-</u>			
	Signature, typed or printed name of registered agent	and title if applicable. (NOT	TE: Registered	d Agent signature requir	red when reinstat		DATE			
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SIGNATURE:

THE COUNTY J. HARD

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