

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

00 MAY 30 PM 12:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L99000006072

1. Entity Name  
CAREPROPERTIES, L.L.C.

Principal Place of Business

2000 EAST EDGEWOOD DRIVE  
SUITE 118  
LAKELAND FL 33803

Mailing Address

2000 EAST EDGEWOOD DRIVE  
SUITE 118  
LAKELAND FL 33803-3649

2. Principal Place of Business

2000 E Edgewood Drive

Suite, Apt. #, etc.

#118

City & State

Lakeland, FL

Zip

33803

Country

USA

3. Mailing Address

777 Yamato Road

Suite, Apt. #, etc.

#330

City & State

Boca Raton, FL

Zip

33431

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0956922

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCCASKILL, SUSAN T

2000 EAST EDGEWOOD DRIVE

SUITE 118

LAKELAND FL 33803

7. Name and Address of New Registered Agent

Name

Myrick, Kim

Street Address (P.O. Box Number is Not Acceptable)

777 Yamato Road

#330

City

Boca Raton, FL

FL

Zip Code  
33431

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(Secretary/Treasurer)

4/28/00

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE MGR  
NAME MCCASKILL, SUSAN T  
STREET ADDRESS 2000 EAST EDGEWOOD DRIVE STE #118  
CITY- ST- ZIP LAKELAND FL 33803

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

10. ADDITIONS/CHANGES

TITLE MGRM Myrick, Kim (Sec/Tres) ☐ Change ☒ Addition  
NAME  
STREET ADDRESS 1664 Flagler Manor Circle  
CITY- ST- ZIP West Palm Beach, FL 33411

TITLE MGRM Lechner, Brian (V.P.) ☐ Change ☒ Addition  
NAME  
STREET ADDRESS 360 SE Mizner Blvd. #1509  
CITY- ST- ZIP Boca Raton, FL 33432

TITLE MGRM McCaskill, Susan (Pres) ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 742 Mulberry Avenue  
CITY- ST- ZIP Celebration, FL 33747

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change

☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE REQUIRED Kim Myrick

4/28/00

561-893-0163

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (9/99)