

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002205

FILED
Jan 06, 2011
Secretary of State

Entity Name: NURSECORE MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

2201 BROOKHOLLOW PLAZA, #450
ARLINGTON, TX 76006

New Principal Place of Business:

Current Mailing Address:

PO BOX 201925
ARLINGTON, TX 76006

New Mailing Address:

FEI Number: 75-2649689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARR, SHARON R OWNER
THE VISTAS
4751 BONITA BAY BLVD #2201
BONITA SPRINGS, FL 34134 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: CARR, SHARON R
Address: 2201 BROOKHOLLOW PLAZA, #450
City-St-Zip: ARLINGTON, TX 76006

Title: MGRM
Name: LOLLAR, DEBORAH
Address: 2201 BROOKHOLLOW PLAZA, #450
City-St-Zip: ARLINGTON, TX 76006

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: DEBORAH LOLLAR

MGRM

01/06/2011

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