

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001810

FILED
Apr 06, 2009
Secretary of State

Entity Name: TODAYCARE, LLC

Current Principal Place of Business:

810 BROADWAY, SUITE 105
NASHVILLE, TN 372033805

New Principal Place of Business:

Current Mailing Address:

810 BROADWAY, SUITE 105
NASHVILLE, TN 372033805

New Mailing Address:

FEI Number: 62-1716041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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 () Delete
Name: BRADY, ROBERT T
Address: 810 BROADWAY, SUITE 105
City-St-Zip: NASHVILLE, TN 372033805

Title: MGRM () Delete
Name: FABER, ROBERT B
Address: 301 SUNNYSIDE DRIVE
City-St-Zip: NASHVILLE, TN 37205

Title: MGRM () Delete
Name: CONWAY-WELCH, COLLEEN
Address: 461 21ST AVENUE SOUTH
City-St-Zip: NASHVILLE, TN 37240

Title: MGRM () Delete
Name: KON, VALENTINA
Address: 6536 RADCLIFF DRIVE
City-St-Zip: NASHVILLE, TN 37221

Title: MGRM () Delete
Name: PFEFFER, PHILIP M
Address: 701 MURFREESBORO ROAD
City-St-Zip: NASHVILLE, TN 37210

Title: MGRM () Delete
Name: ANDREWS, NELSON
Address: 2002 RICHARD JONES ROAD, SUITE 200-A
City-St-Zip: NASHVILLE, TN 37215

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ROBERT BRADY

CEO

04/06/2009

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