

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003419

Entity Name: UNIONCARE, LLC

FILED  
Mar 19, 2011  
Secretary of State

**Current Principal Place of Business:**

1625 EYE ST, NW  
WASHINGTON, DC 20006

**New Principal Place of Business:**

1625 EYE STREET, NW  
WASHINGTON, DC 20006

**Current Mailing Address:**

1625 EYE ST, NW  
WASHINGTON, DC 20006

**New Mailing Address:**

1625 EYE STREET, NW  
WASHINGTON, DC 20006

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: ULLICO, INC.  
Address: 1625 EYE STREET, NW  
City-St-Zip: WASHINGTON, DC 20006

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: LAURA LOUIS

POA

03/19/2011

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