2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2015
Secretary of State
CC6503512920

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Entity Name: FLORIDA CARE MANAGEMENT LLC

Current Principal Place of Business:

2364 OTHELLO CT
THE VILLAGES, FL 32162

Current Mailing Address:

2364 OTHELLO CT
THE VILLAGES, FL 32162

FEI Number: 80-0273070

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COHEN, SHERYL MPRES
2364 OTHELLO CT
THE VILLAGES, FL 32162 US

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

Authorized Person(s) Detail :

Title	PRES
Name	COHEN, SHERYL
Address	2364 OTHELLO CT
City-State-Zip:	THE VILLAGES FL 32162

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERYL COHEN PRES 01/12/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date