2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2014
Secretary of State
CC3663647304

DOCUMENT# L11000143911

Entity Name: IN GOOD HANDS ELDER CARE, LLC

Current Principal Place of Business:

779 N. LAKE BLVD.
TARPON SPRINGS, FL 34689

Current Mailing Address:

PO BOX 243
TARPON SPRINGS, FL 34688 US

FEI Number: 45-4386945

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRANT, RHETT
779 N. LAKE BLVD.
TARPON SPRINGS, FL 34689 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	MGRM	Title	MGRM
Name	GRANT, RHETT	Name	GRANT, RICHARD F
Address	PO BOX 243	Address	PO BOX 243
City-State-Zip:	TARPON SPRINGS FL 34688	City-State-Zip:	TARPON SPRINGS FL 34688

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: RHETT GRANT OWNER 03/17/2014

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