

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000061623

Entity Name: FLORIDA HEALTH TEAM, LLC

FILED
Mar 08, 2008
Secretary of State

Current Principal Place of Business:

11 BAYMONT ST. #902
CLEARWATER, FL 33767

New Principal Place of Business:

11 BAYMONT ST. #902
CLEARWATER BEACH, FL 33767

Current Mailing Address:

11 BAYMONT ST. #902
CLEARWATER, FL 33767

New Mailing Address:

11 BAYMONT ST. #902
CLEARWATER BEACH, FL 33767

FEI Number: 26-0339905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDER, LYNNE ESQ.
777 S. HARBOPUR ISLAND BLVD.
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

GREENBERG, BRYAN
11 BAYMONT ST
UNIT 902
CLEARWATER BEACH, FL 33767 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: BRYAN GREENBERG

03/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES () Change (X) Addition
Name: GREENBERG, BRYAN
Address: 11 BAYMONT ST UNIT 902
City-St-Zip: CLEARWATER BEACH, FL 33767

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: BRYAN GREENBERG

PRES

03/08/2008

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