

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Mar 08, 2010
Secretary of State

Entity Name: ANU HEALTH MANAGEMENT LLC

Current Principal Place of Business:

301 NORTHPOINTE PARKWAY
WEST PALM BEACH, FL 33407

New Principal Place of Business:

1675 PALM BEACH LAKES BOULEVARD
SUITE 900
WEST PALM BEACH, FL 33401

Current Mailing Address:

301 NORTHPOINTE PARKWAY
WEST PALM BEACH, FL 33407

New Mailing Address:

1675 PALM BEACH LAKES BOULEVARD
SUITE 900
WEST PALM BEACH, FL 33401

FEI Number: 27-0732354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPECTOR GADON & ROSON, LLP
360 CENTRAL AVENUE, SUITE 1550
ST. PETERSBURG, FL 33701 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: AIRAMID FLORIDA LLC
Address: 1675 PALM BEACH LAKES BOULEVARD, SUITE 900
City-St-Zip: WEST PALM BEACH, FL 33401

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: AIRAMID FLORIDA LLC

MGRM

03/08/2010

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