

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001798

FILED
Feb 01, 2011
Secretary of State

Entity Name: HEALTH AND HEALING CENTER, L.L.C.

Current Principal Place of Business:

4525 SW 13TH STREET
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

4525 SW 13TH STREET
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3635931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOER, CHARLES B MD
4525 SW 13TH STREET
GAINESVILLE, FL 32608 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: P
Name: STOER, CHARLES B
Address: 4525 SW 13TH ST.
City-St-Zip: GAINESVILLE, FL 32608

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: CHARLES B. STOER

P

02/01/2011

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