

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022500

FILED
Jan 14, 2011
Secretary of State

Entity Name: NU INSTITUTE FOR AGE MANAGEMENT AND INTERVENTION, LLC

Current Principal Place of Business:

1441 BRICKELL AVE
THE FOUR SEASONS HOTEL AND TOWER SKY LOBBY
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1441 BRICKELL AVE
THE FOUR SEASONS HOTEL AND TOWER SKY LOBBY
MIAMI, FL 33131

New Mailing Address:

FEI Number: 83-0362208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS & REAL ESTATE LAW GROUP, P.L.
1501 SUNSET DRIVE
2ND FLOOR
CORAL GABLES, FL 33131 US

Name and Address of New Registered Agent:

CFRA, LLC
4221 W. BOYSCOUT BLVD
SUITE 1000
TAMPA, FL 33607 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: ROBERT MACAULAY

01/14/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: WATSON, STEPHEN
Address: 1441 BRICKELL AVE, 3RD FLOOR
City-St-Zip: MIAMI, FL 33131

Title: MGR
Name: GALLO, JULIO F M.D.
Address: 1441 BRICKELL AVE, 3RD FLOOR
City-St-Zip: MIAMI, FL 33131

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: JULIO GALLO

MGR

01/14/2011

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