2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2010
Secretary of State

DOCUMENT# L04000002399

Entity Name: HEALTH LINK ASSOCIATES, LLC

Current Principal Place of Business:

5290 APPLEGATE DR
SPRING HILL, FL 34606 US

New Principal Place of Business:

Current Mailing Address:

5290 APPLEGATE DR
SPRING HILL, FL 34606 US

New Mailing Address:

FEI Number: 20-0571882 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PIERRE, CHRISTINE
5290 APPLEGATE DR
SPRING HILL, FL 34606 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: PIERRE, JUDE A
Address: 5290 APPLEGATE DR
City-St-Zip: SPRING HILL, FL 34606 US

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 Statues.

SIGNATURE: JUDE A. PIERRE MGM 04/29/2010

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