

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031465

Entity Name: ILENE ON HEALTH, LLC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

4505 ROANOAK WAY
SUITE 301
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4505 ROANOAK WAY
SUITE 301
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PRES () Delete
Name: GERSHBERG, ILENE L
Address: 4505 ROANOAK WAY
City-St-Zip: PALM HARBOR, FL 34685 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ILENE L. GERSHBERG PRES 04/27/2009

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