

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044667

FILED
Jan 17, 2010
Secretary of State

Entity Name: ALACHUA HEALTH SERVICES, LLC

Current Principal Place of Business:

2730 NW 39TH AVE
GAINESVILLE, FL 32605 US

New Principal Place of Business:

Current Mailing Address:

14828 NW 107 TERRACE
ALACHUA, FL 32615 US

New Mailing Address:

FEI Number: 57-1207717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORENO, JOSE I
240 NW 76TH DRIVE
SUITE D
GAINESVILLE, FL 32607 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: BARNETT, WILLIAM S
Address: 2730 NW 39TH AVE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: MGRM
Name: BARNETT, JUSTIN G
Address: 2730 NW 39TH AVE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: MGRM
Name: BARNETT, DAVID S
Address: 2730 NW 39TH AVE
City-St-Zip: GAINESVILLE, FL 32605 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 Statutes.

SIGNATURE: WILLIAM SCOTT BARNETT

MMG

01/17/2010

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