

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052847

FILED  
Jan 12, 2006  
Secretary of State

**Entity Name:** HEALTH AWARENESS FOUNDATION, L.L.C.

**Current Principal Place of Business:**

C/O 16109 CAMAS AVENUE  
PORT CHARLOTTE, FL 33954

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 16109 CAMAS AVENUE  
PORT CHARLOTTE, FL 33954

**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:**

BAXLEY, MILTON H II  
1929 N.W. 12TH TERRACE  
GAINESVILLE, FL 32609 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 ( ) Delete  
Name: MORSE, BRENDA  
Address: C/O 16109 CARNAS AVE  
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: MGRM ( ) Delete  
Name: MORSE, ROBERT  
Address: C/O 16109 CARNAS AVE  
City-St-Zip: PORT CHARLOTTE, FL 33953

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MORSE, BRENDA  
Address: C/O 16109 CAMAS AVE  
City-St-Zip: PORT CHARLOTTE, FL 33954

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

I hereby certify that the information supplied with this filing does not qualify for the 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:** ROBERT MORSE

MGRM

01/12/2006

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