

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052847

FILED
Mar 09, 2010
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
Name: MORSE, BRENDA
Address: C/O 16109 CAMAS AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

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

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: ROBERT MORSE

MGRM

03/09/2010

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