

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055626

FILED
Jul 02, 2005
Secretary of State

Entity Name: WOMEN'S HEALTH FIRST, PL

Current Principal Place of Business:

6736 CALISTOGA CIRCLE
PORT ORANGE, FL 32128

New Principal Place of Business:

3959 SOUTH NOVA ROAD
#14
PORT ORANGE, FL 32127

Current Mailing Address:

6736 CALISTOGA CIRCLE
PORT ORANGE, FL 32128

New Mailing Address:

FEI Number: 20-1421924 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVENUE
DAYTONA BEACH, FL 32114 US

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:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: HOWE, JULIA D
Address: 3959 SOUTH NOVA ROAD, SUITE 14
City-St-Zip: PORT ORANGE, FL 32127

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 Section 119.07(3)(i), 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: JULIA D. HOWE

LCSW

07/02/2005

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