

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082995

Entity Name: DELAND HEALING CENTER, LLC

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

526 LAND O'LAKES CT.
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

526 LAND O'LAKES CT.
DELAND, FL 32724

New Mailing Address:

FEI Number: 20-2744016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROCE, ANN JEROME
526 LAND O'LAKES CT.
DELAND, FL 32724 US

Name and Address of New Registered Agent:

JEROME, ANN E
526 LAND O'LAKES CT.
DELAND, FL 32724 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: ANN E. JEROME

01/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CROCE, ANN JEROME
Address: 526 LAND O'LAKES CT.
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JEROME, ANN E
Address: 526 LAND O'LAKES CT.
City-St-Zip: DELAND, FL 32724

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: ANN E. JEROME

MGRM

01/07/2009

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