## 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047904

Entity Name: PORTION HEALTH PRODUCTS, LLC

Apr 19, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

213 9TH ST.

ST. AUGUSTINE, FL 32080 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 1494

ST. AUGUSTINE, FL 32084 US

FEI Number: 20-2843916 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JUBERT, JAY JUBERT, JAY A 213 9TH ST. 213 9TH ST.

ST. AUGUSTINE, FL 32080 US ST. AUGUSTINE, FL 32080 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: JAY A JUBERT 04/19/2010

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

MGRM JUBERT, JAY A Name: Address: 213 9TH ST. #A

City-St-Zip: ST. AUGUSTINE, FL 32080 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 Statues.

04/19/2010 SIGNATURE: JAY A JUBERT **MGRM**