

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000018686

Entity Name: HENORA HEALTHCARE LLC

FILED
Jan 13, 2012
Secretary of State

Current Principal Place of Business:

4637 NW 6TH STREET
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 358411
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number: 59-7211010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KAHN, DARREN F
4637 NW 6TH STREET
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: DKAHN VENTURES LLC
Address: P.O. BOX 358411
City-St-Zip: GAINESVILLE, FL 32635

Title: MGRM
Name: IVAN & IVAN LLC
Address: 7950 NW 53RD ST SUITE 215
City-St-Zip: DORAL, FL 33166

Title: MGRM
Name: FERREBUS, ARGENIS MD
Address: 10712 NORTH WEST 77TH STREET
City-St-Zip: DORAL, FL 33178

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: DARREN KAHN

MGRM

01/13/2012

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