

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037674

FILED
May 13, 2009
Secretary of State

Entity Name: PHYSICIAN NATURAL SOLUTIONS, LLC

Current Principal Place of Business:

2811-C INDUSTRIAL PLAZA DRIVE
TALLAHASSEE, FL 32301

New Principal Place of Business:

2820 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308

Current Mailing Address:

2811-C INDUSTRIAL PLAZA DRIVE
TALLAHASSEE, FL 32301

New Mailing Address:

2820 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

BIST, MICHAEL P
1300 THOMASWOOD DRIVE
TALLAHASSEE, FL 32308 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: HUGGINS, WILLIAM F
Address: 220 SAN JOSE DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BILL HUGGINS

MGR

05/13/2009

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