

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000068009

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: HEALTH BUILDERS INTERNATIONAL LLC

## Current Principal Place of Business:

1835 EAST WEST PARKWAY  
ORANGE PARK, FL 32003

## New Principal Place of Business:

6535 PINE AVE.  
FLEMING ISLAND, FL 32003 US

## Current Mailing Address:

1835 EAST WEST PARKWAY  
ORANGE PARK, FL 32003

## New Mailing Address:

6535 PINE AVE.  
FLEMING ISLAND, FL 32003 US

FEI Number: 20-4970224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUVAL, STEPHEN J  
428 WALNUT STREET  
GREEN COVE SPRINGS, FL 32043 US

## Name and Address of New Registered Agent:

VICKI MIDDLEKAUFF CMA, PA  
767 BLANDING BLVD.,  
STE. 110A  
ORANGE PARK, FL 32065 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: VICKI MIDDLEKAUFF

04/28/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ROLAND, SHANNON E  
Address: 6535 PINE AVENUE  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: MGRM ( ) Delete  
Name: ROLAND, DAWN  
Address: 6535 PINE AVENUE  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ROLAND, SHANNON E  
Address: 6535 PINE AVENUE  
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: MGRM (X) Change ( ) Addition  
Name: ROLAND, DAWN  
Address: 6535 PINE AVENUE  
City-St-Zip: FLEMING ISLAND, FL 32003 US

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: SHANNON ROLAND

MGRM

04/28/2009

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