

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083184

Entity Name: HEALTHCOACH, LLC

FILED
Aug 22, 2007
Secretary of State

Current Principal Place of Business:

4524 N. 56TH ST.
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

2101 OAK HILL DR.
VALRICO, FL 33594

New Mailing Address:

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:

SPIVEY, KELLY
2101 OAK HILL DR.
VALRICO, FL 33594 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:

Title: MGRM () Delete
Name: SPIVEY, KELLY
Address: 2101 OAK HILL DR.
City-St-Zip: VALRICO, FL 33594

Title: MGR () Delete
Name: SPIVEY, DANIEL
Address: 2101 OAK HILL DR.
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES:

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

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: KELLY M SPIVEY

MGR

08/22/2007

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