

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083820

Entity Name: HARDY HEALTH, LLC

FILED
Feb 13, 2008
Secretary of State

Current Principal Place of Business:

509 S CHICKASAW TRAIL
#318
ORLANDO, FL 32825

New Principal Place of Business:

2507 ROSE SPRING DR
ORLANDO, FL 32825

Current Mailing Address:

2507 ROSE SPRUNG DR
ORLANDO, FL 32825

New Mailing Address:

2507 ROSE SPRING DR
ORLANDO, FL 32825

FEI Number: 20-5450566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDY, PHILIP T
509 CHICKASAW TRAIL
#318
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

HARDY, PHILIP T
2507 ROSE SPRING DR
ORLANDO, FL 32825 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:

02/13/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HARDY, PHILIP T
Address: 509 CHICKASAW TRAIL #318
City-St-Zip: WINTER PARK, FL 32825 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HARDY, PHILIP T
Address: 2507 ROSE SPRING DR
City-St-Zip: ORLANDO, FL 32825 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: PHILIP T HARDY

MGR

02/13/2008

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