

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000083820

Entity Name: HARDY HEALTH, LLC

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

11602 LAKE UNDERHILL RD  
STE 119  
ORLANDO, FL 32825

**New Principal Place of Business:**

**Current Mailing Address:**

11602 LAKE UNDERHILL RD  
STE 119  
ORLANDO, FL 32825

**New Mailing Address:**

FEI Number: 20-5450566

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KATHRYN V ROSS, CPA P.A.  
3823 N. ECONLOCKHATCHEE TRAIL  
STE D-5  
ORLANDO, FL 32825 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: HARDY, PHILIP T  
Address: 2507 ROSE SPRING DR  
City-St-Zip: ORLANDO, FL 32825 US

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: KATHRYN V. ROSS, CPA

RA

02/02/2012

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