

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092156

FILED  
Mar 25, 2009  
Secretary of State

**Entity Name:** INTERNATIONAL BOARD OF HEALTH SERVICES L.L.C.

**Current Principal Place of Business:**

11145 RODEO LANE  
RIVERVIEW, FL 33579

**New Principal Place of Business:**

**Current Mailing Address:**

11145 RODEO LANE  
RIVERVIEW, FL 33579

**New Mailing Address:**

**FEI Number:** 26-0005800

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HORNER, GEOFFREY F  
11145 RODEO LANE  
RIVERVIEW, FL 33569 US

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

HORNER, GEOFFREY F  
11145 RODEO LANE  
RIVERVIEW, FL 33579 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:

03/25/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HORNER, GEOFFREY F  
Address: 11145 RODEO LANE  
City-St-Zip: RIVERVIEW, FL 33569

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: HORNER, GEOFFREY F  
Address: 11145 RODEO LANE  
City-St-Zip: RIVERVIEW, FL 33579

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: GEOFFREY F. HORNER

PRES

03/25/2009

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