

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000111812

**FILED
Feb 19, 2010
Secretary of State**

Entity Name: FLORIDA INTEGRATED HEALTH SERVICES LLC

Current Principal Place of Business:

404 N ALEXANDER ST
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

404 N ALEXANDER ST
PLANT CITY, FL 33563 US

New Mailing Address:

FEI Number: 20-5916507 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ADEYEMO, ABIOLA A
4213 TRUMPWORTH COURT
VALRICO, FL 33596 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: MGR
Name: ADEYEMO, ABIOLA A
Address: 4213 TRUMPWORTH COURT
City-St-Zip: VALRICO, FL 33596 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: ABIOLA ADEYEMO MR 02/19/2010

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