

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112613

FILED
Jun 27, 2007
Secretary of State

Entity Name: HEALTHWAY OF FLORIDA, LLC

Current Principal Place of Business:

2630 SAWYER TERRACE
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

2630 SAWYER TERRACE
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 01-0878679 FEI Number Applied For () FEI Number Not Applicable () 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:

DELVICARIO, JOSEPH
2630 SAWYER TERRACE
WELLINGTON, FL 33414 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 () Delete
Name: DELVICARIO, JOSEPH
Address: 2630 SAWYER TERRACE
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: DELVICARIO, JULIEANN
Address: 2630 SAWYER TERRACE
City-St-Zip: WELLINGTON, FL 33414

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: JOSEPH DELVICARIO

MGRM

06/27/2007

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