

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000018202

Entity Name: HEALTH ESSENTIALS LC

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1241 SEBASTIAN COVE  
LAKE MARY, FL 32746

**New Principal Place of Business:**

3836 DORWOOD DR  
ORLANDO, FL 32818

**Current Mailing Address:**

1241 SEBASTIAN COVE  
LAKE MARY, FL 32746

**New Mailing Address:**

3836 DORWOOD DR  
ORLANDO, FL 32818

FEI Number: 26-6816435

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBERTS, CHANTEL  
1241 SEBASTIAN COVE  
LAKE MARY, FL 32746 US

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

ROBERTS, CHANTEL  
3836 DORWOOD DR  
ORLANDO, FL 32818 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:

02/17/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROBERTS, CHANTEL  
Address: 3836 DORWOOD DR  
City-St-Zip: ORLANDO, FL 32818

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: CHANTEL ROBERTS

MGRM

02/17/2010

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