

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000028517

**FILED**  
**Jan 28, 2010**  
**Secretary of State**

**Entity Name:** HEART 2 HEART BIRTH CENTER, LLC

**Current Principal Place of Business:**

1301 S. PARK AVENUE  
SANFORD, FL 32771

**New Principal Place of Business:**

1110 LEXINGTON GREEN LANE  
SANFORD, FL 32771

**Current Mailing Address:**

1301 S. PARK AVENUE  
SANFORD, FL 32771

**New Mailing Address:**

1110 LEXINGTON GREEN LANE  
SANFORD, FL 32771

**FEI Number:** 20-8637861

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAWNE, MICHELLE  
1301 S. PARK AVENUE  
SANFORD, FL 32771 US

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

GAWNE, MICHELLE  
1110 LEXINGTON GREEN LANE  
SANFORD, FL 32771 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: \_\_\_\_\_

01/28/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GAWNE, MICHELLE  
Address: 224 DIRKSEN DRIVE  
City-St-Zip: DEBARY, FL 32713

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: MICHELLE GAWNE

MNGR

01/28/2010

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