

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000059890

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** A HEALTHY PERSPECTIVE, LLC

**Current Principal Place of Business:**

6555 POWERLINE ROAD  
SUITE 102  
FT LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

6555 POWERLINE ROAD  
SUITE 103  
FT LAUDERDALE, FL 33309 US

**Current Mailing Address:**

6555 POWERLINE ROAD  
SUITE 102  
FT LAUDERDALE, FL 33309 US

**New Mailing Address:**

6555 POWERLINE ROAD  
SUITE 103  
FT LAUDERDALE, FL 33309 US

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

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

NEW LIFE GROUP, LLC  
6555 POWERLINE ROAD  
SUITE 102  
FT LAUDERDALE, FL 33309 US

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

NEW LIFE GROUP, LLC  
6555 POWERLINE ROAD  
SUITE 103  
FT LAUDERDALE, FL 33309 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: KAREN VULGAMORE

04/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: VULGAMORE, KAREN  
Address: 6555 POWERLINE ROAD  
City-St-Zip: FT LAUDERDALE, FL 33309 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: VULGAMORE, KAREN  
Address: 8109 LAGOS DECAPO BLVD  
City-St-Zip: TAMARAC, FL 33321 US

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: KAREN VULGAMORE

MGR

04/30/2008

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