

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094761

FILED
Mar 05, 2009
Secretary of State

Entity Name: HEALTH EDUCATION AND RESCUE TRAINING, LLC

Current Principal Place of Business:

10364 WHITE PINTO COURT
LAKE WORTH, FL 33449

New Principal Place of Business:

Current Mailing Address:

10364 WHITE PINTO COURT
LAKE WORTH, FL 33449

New Mailing Address:

FEI Number: 26-1078421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVEY, JENNIFER L
6190 CAMP LEE ROAD
WEST PALM BEACH, FL 33417 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: KIRSHBAUM, BRYAN S
Address: 10364 WHITE PINTO COURT
City-St-Zip: LAKE WORTH, FL 33449

Title: MGRM () Delete
Name: SILVEY, JENNIFER L
Address: 6190 CAMP LEE ROAD
City-St-Zip: WEST PALM BEACH, FL 33417

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: BK

MGRM

03/05/2009

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