

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000110437

FILED
Jan 13, 2010
Secretary of State

Entity Name: THE HEALTH CLINIC, LLC

Current Principal Place of Business:

1351 SOUTH BOULEVARD
CHIPLEY, FL 32428

New Principal Place of Business:

Current Mailing Address:

1351 SOUTH BOULEVARD
P.O. BOX 947
CHIPLEY, FL 32428 US

New Mailing Address:

FEI Number: 26-1387944

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHAN, SOHAIL M
118 COTTONWOOD CIRCLE
LYNN HAVEN, FL 32444 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
Name: KHAN, SOHAIL M
Address: 1000 OHIO AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: MGRM
Name: MALIK, AMER R
Address: 1000 OHIO AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: MGRM
Name: ZABIH, ISMAIL M
Address: 1000 OHIO AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

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: SOHAIL M. KHAN

MGRM

01/13/2010

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