

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000112030

FILED
Jul 06, 2008
Secretary of State

Entity Name: TALLAHASSEE HEALTH CLINIC, LLC

Current Principal Place of Business:

1773 HILL N DALE
TALLAHASSEE, FL 32317 US

New Principal Place of Business:

1706 RIGGINS ROAD
TALLAHASSEE, FL 32308 US

Current Mailing Address:

1773 HILL N DALE
TALLAHASSEE, FL 32317 US

New Mailing Address:

1706 RIGGINS ROAD
TALLAHASSEE, FL 32308 US

FEI Number: 26-1368871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DIAO, CLYDE L
1307 WALDEN ROAD
TALLAHASSEE, FL 32317 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: PATAOXIL, FILEMON
Address: 1773 HILL N DALE
City-St-Zip: TALLAHASSEE, FL 32317 US

Title: MGRM () Delete
Name: PATAOXIL, MERLINDA
Address: 1773 HILL N DALE
City-St-Zip: TALLAHASSEE, FL 32317 US

Title: MGRM () Delete
Name: GABOR, CARMEN L
Address: 1307 WALDEN ROAD
City-St-Zip: TALLAHASSEE, FL 32317 US

Title: MGRM () Delete
Name: DIAO, CLYDE L
Address: 1307 WALDEN ROAD
City-St-Zip: TALLAHASSEE, FL 32317 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CLYDE L. DIAO

MGRM

07/06/2008

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