

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000112784

FILED
May 01, 2012
Secretary of State

Entity Name: ALLIED HEALTH CARE ADVISORS, LLC

Current Principal Place of Business:

1532 NW 7 TERRACE
POMPANO BEACH, FL 33306

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2546
ROANOKE, VA 24010 25

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RITCHSON (PRICE), CANIE(CANUTA)
1532 NW 7 TERRACE
POMPANO BEACH, FL 33060 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: MGR
Name: RITCHSON (PRICE), CANIE(CANUTA)
Address: 1532 NW 7 TERRACE
City-St-Zip: POMPANO BEACH, FL 33060

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: CANUTA (CANUTA) RITCHSON-PRICE

MGR

05/01/2012

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