2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 01, 2012
Secretary of State

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Entity Name: GLOBAL IMPACT HEALTHCARE MANAGEMENT LLC

Current Principal Place of Business:

419 COURTLEA OAKS BLVD
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

419 COURTLEA OAKS BLVD
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 26-1774188 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPRINGER, TONI B
155 CRANES ROOST BLVD
SUITE 2050
ALTAMONTE SPRINGS, FL 32701 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: JOHNSON, JOEL
Address: 419 COURTLEA OAKS BLVD
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGR
Name: ARCARA, STEVEN T
Address: 515 EAST GORE STREET
City-St-Zip: ORLANDO, FL 32806

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 Statues.

SIGNATURE: JOEL JOHNSON MGRM 03/01/2012

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