2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2012
Secretary of State

DOCUMENT# L08000011188

Entity Name: LIFE EXTENSION AT DR. PHILLIPS, LLC

Current Principal Place of Business:

8956 TURKEY LAKE ROAD
STE. 700
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 941353
MAITLAND, FL 32794

New Mailing Address:

FEI Number: 26-2085424 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLLINS, ANGELA M
8956 TURKEY LAKE ROAD, STE.700
ORLANDO, FL 32819 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: PRES
Name: COLLINS, ANGELA M
Address: PO BOX 941353
City-St-Zip: MAITLAND, FL 32794

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: ANGELA M. COLLINS PRES 04/11/2012

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