## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018340

Address:

City-St-Zip:

Entity Name: KEYSTONE HEALTH PARTNERS (SARASOTA), LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
3859 BEE RIDGE RD SUITE 101 SARASOTA, FL 34233				
Current Mailing Address:		New Mailing Address:		
3859 BEE RIDGE RD SUITE 101 SARASOTA, FL 34233				
FEI Number: 26-2062063	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
KHP GLOBAL, INC 3859 BEE RIDGE RD SUITE 101 SARASOTA, FL 34233	Js			
The above named entity sin the State of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both	
SIGNATURE:				
Electronic Signature of Registered Age		ent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: ( ) Name:	Delete	Title: MGRM Name: KLEMEYE	()Change(X)Addition R, ROBERT	

Address:

City-St-Zip:

3859 BEE RIDGE RD #101

SARASOTA, FL 34233

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: ROBERT KLEMEYER MGRM 04/30/2009