2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 06, 2009
Secretary of State

DOCUMENT# L08000044665

Entity Name: GEMINI HEALTH, LLC

Current Principal Place of Business:

187 S. WICKHAM ROAD
#101
MELBOURNE, FL 32904

New Principal Place of Business:

395 S. WICKHAM ROAD
MELBOURNE, FL 32904

Current Mailing Address:

187 S. WICKHAM ROAD
#101
MELBOURNE, FL 32904

New Mailing Address:

395 S. WICKHAM ROAD
MELBOURNE, FL 32904

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VARA, KRISHNA
187 S. WICKHAM ROAD
#101
MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

VARA, KRISHNA
395 S. WICKHAM ROAD
#101
MELBOURNE, FL 32904 US

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: KRISHNA VARA 02/06/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: VARA, KRISHNA
Address: 187 S. WICKHAM ROAD
City-St-Zip: MELBOURNE, FL 32904

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: VARA, KRISHNA
Address: 395 S. WICKHAM ROAD
City-St-Zip: MELBOURNE, FL 32904

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: KRISHNA VARA MGR 02/06/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date