

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000072589

FILED
Apr 28, 2009
Secretary of State

Entity Name: ALTERNATIVE HEALTH SOLUTIONS OF SUWANNEE VALLEY, LLC

Current Principal Place of Business:

8274 97TH ROAD
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

8274 97TH ROAD
LIVE OAK, FL 32060

New Mailing Address:

FEI Number: 26-3078695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUMPKIN, KATHY E
8274 97TH ROAD
LIVE OAK, FL 32060 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P () Change (X) Addition
Name: LUMPKIN, KATHY
Address: 8274-97TH ROAD
City-St-Zip: LIVE OAK, FL 32060 US

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: KATHY LUMPKIN

P

04/28/2009

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