# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 26, 2012**
**Secretary of State**

DOCUMENT# L08000092081

**Entity Name:** NAVHEALTH, LLC

**Current Principal Place of Business:**

1475 COLLINGSWOOD BLVD. SUITE C
SUITE C
PORT CHARLOTTE, FL 33948

**New Principal Place of Business:**

**Current Mailing Address:**

5420 ROYAL POINCIANA WAY
NORTH PORT, FL 34291

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

KORSCH FINANCIAL GROUP, INC.
1475 COLLINGSWOOD BLVD.
SUITE B
PORT CHARLOTTE, FL 33948 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: KORSCH FINANCIAL GROUP, INC
Address: 1475 COLLINGSWOOD BLVD. SUITE C
City-St-Zip: PORT CHARLOTTE, FL 33948

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: MARC KORSCH MGR 04/26/2012

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