

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000022063

**FILED**  
**Feb 26, 2010**  
**Secretary of State**

**Entity Name:** DIGNITY HEALTHCARE EDUCATION, L.L.C.

**Current Principal Place of Business:**

1031 IVES DAIRY ROAD  
SUITE 228  
MIAMI, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

1031 IVES DAIRY ROAD  
SUITE 228  
MIAMI, FL 33179

**New Mailing Address:**

**FEI Number:** 26-4415596      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CANDY, MARIE L  
1031 IVES DAIRY ROAD  
SUITE 228  
MIAMI, FL 33179 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: CANDY, MARIE L  
Address: 1031 IVES DAIRY ROAD, SUITE 228  
City-St-Zip: MIAMI, FL 33179

Title: MGRM  
Name: HONORE, WILLIAM  
Address: 1031 IVES DAIRY ROAD, SUITE 228  
City-St-Zip: MIAMI, FL 33179

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 Statutes.

SIGNATURE: MARIE CANDY      MGRM      02/26/2010

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