

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000024603

Entity Name: EMPOWERHEALTH, LLC

FILED
Mar 15, 2011
Secretary of State

Current Principal Place of Business:

211 JOHN KNOX ROAD
SUITE 110
TALLAHASSEE, FL 32315

Current Mailing Address:

POST OFFICE BOX 3783
TALLAHASSEE, FL 32315

New Principal Place of Business:

20283 STATE ROAD 7
SUITE 400
BOCA RATON, FL 33498 US

New Mailing Address:

20283 STATE ROAD 7
SUITE 400
BOCA RATON, FL 33498 US

FEI Number: 26-4464082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHT, SUMMER S
211 JOHN KNOX ROAD
SUITE 110
TALLAHASSEE, FL 32315 US

Name and Address of New Registered Agent:

ROBERT ARNOLD ESQ.
20283 STATE ROAD 7
SUITE 400
BOCA RATON, FL 33498 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: ROBERT ARNOLD

03/15/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ARNOLD, ROBERT
Address: 20283 STATE ROAD 7
City-St-Zip: BOCA RATON, FL 33498 US

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: ROBERT ARNOLD

MGR

03/15/2011

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