

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000059036

FILED  
Mar 08, 2010  
Secretary of State

Entity Name: LIFELINEF1 LLC

**Current Principal Place of Business:**

38 HANKINS FARM ROAD  
C/O KHAWAR J AHMED  
ALLENTOWN, NJ 08501

**New Principal Place of Business:**

**Current Mailing Address:**

38 HANKINS FARM ROAD  
C/O KHAWAR J AHMED  
ALLENTOWN, NJ 08501

**New Mailing Address:**

FEI Number: 27-0393654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHEREGAR, RAGAVENDER  
6040 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32809 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: AHMED, KHAWAR  
Address: 38 HANKINS FARM ROAD  
City-St-Zip: ALLENTOWN, NJ 08501

Title: MGRM  
Name: NAGORI, ABDUL  
Address: 289 FARIST ROAD  
City-St-Zip: FAIRFIELD, CT 06825

Title: MGRM  
Name: ABBASI, ALTAF  
Address: 460 SQUIRE LANE  
City-St-Zip: ORANGE, CT 06477

Title: MGRM  
Name: AZIZ, ATIF  
Address: 105 BURGESS ROAD  
City-St-Zip: COLLEGEVILLE, PA 19426

Title: MGRM  
Name: BABAR SAEED(TTEE),EQUITYTRUSTCO 401K 97327  
Address: C/O EQUITY TRUST COMPANY, 225 BURNS RD,  
City-St-Zip: ELYRIA, OH 44035

Title: MGRM  
Name: KHAN, IMTIAZ  
Address: 65 BRIAR COURT  
City-St-Zip: HAMBURG, NJ 07419

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: IMTIAZ KHAN

MGRM

03/08/2010

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