

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000068526

FILED
Apr 20, 2011
Secretary of State

Entity Name: NAPLES HEALTH NETWORK, LLC

Current Principal Place of Business:

1197 22ND AVE. NORTH
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

1197 22ND AVE. NORTH
NAPLES, FL 34103

New Mailing Address:

FEI Number: 27-0620836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARY, MARY BETH M
9132 STRADA PLACE 3RD FLOOR
NAPLES, FL 34108 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: MGR
Name: HARTZ, CORTLON M
Address: 1197 22ND AVE. NORTH
City-St-Zip: NAPLES, FL 34103

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: CORTLON HARTZ

OWNE

04/20/2011

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