

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000103057

FILED
Feb 16, 2011
Secretary of State

Entity Name: CHARLOTTE HEALTH CENTER, LLC

Current Principal Place of Business:

4130 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

C/O DAVID A. HOLMES, ESQ
99 NESBIT STREET
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 27-1185762 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMES, DAVID A
99 NESBIT STREET
PUNTA GORDA, FL 33950 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: ROSENFELD, LOUIS D
Address: 4130 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952 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: LOUIS D ROSENFELD MGRM 02/16/2011

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