2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2010
Secretary of State

DOCUMENT# L09000108655

Entity Name: GOODLIFE HEALTHCARE LLC

Current Principal Place of Business:

28420 SOMBRERO DRIVE
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

3665 BONITA BEACH ROAD
SUITE 1-3
BONITA SPRINGS, FL 34134 US

Current Mailing Address:

28420 SOMBRERO DRIVE
BONITA SPRINGS, FL 34135 US

New Mailing Address:

3665 BONITA BEACH ROAD
SUITE 1-3
BONITA SPRINGS, FL 34134 US

FEI Number: 27-1315928 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOHL, JOACHIM
28420 SOMBRERO DRIVE
BONITA SPRINGS, FL 34135 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: BOHL, JOACHIM
Address: 28420 SOMBRERO DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: MGRM
Name: BOHL, ELISABETH
Address: 28420 SOMBRERO DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135 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 Statues.

SIGNATURE: JOACHIM BOHL MGR 03/30/2010

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