

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000070766

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA HEARTSAVER, LLC

**Current Principal Place of Business:**

4616 NW 57TH DR.  
GAINESVILLE, FL 32606 US

**New Principal Place of Business:**

**Current Mailing Address:**

POBOX 358796  
GAINESVILLE, FL 32635 US

**New Mailing Address:**

**FEI Number:** 27-3037244      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KIM, JONGHYUCK  
4616 NW 57TH DR.  
GAINESVILLE, FL 32606 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:** KIM, JONGHYUCK  
**Address:** 4616 NW 57TH DR.  
**City-St-Zip:** GAINESVILLE, FL 32606 US

**Title:** MGRM  
**Name:** DUFF, JON  
**Address:** 5307 SW 88TH CT  
**City-St-Zip:** GAINESVILLE, FL 32608 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:** JONGHYUCK KIM

D

04/19/2011

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