2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 06, 2011
Secretary of State

DOCUMENT# L10000086443

Entity Name: FLORIDA ALLIED HEALTH INSTITUTE LLC

Current Principal Place of Business:

11336 WILES ROAD
CORAL SPRINGS, FL 33076 US

New Principal Place of Business:

Current Mailing Address:

11336 WILES ROAD
CORAL SPRINGS, FL 33076

New Mailing Address:

11336 WILES ROAD
CORAL SPRINGS, FL 33076 US

FEI Number: 27-3265932 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICHARDS, MICHAEL S
11336 WILES RD
CORAL SPRINGS, FL 33076 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: RICHARDS, MICHAEL S
Address: 11336 WILES RD
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: MGR
Name: RICHARDS, CLAUDETTE Y
Address: 11336 WILES RD
City-St-Zip: CORAL SPRINGS, FL 33076 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: CLAUDETTE RICHARDS MGR 02/06/2011

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