

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000090503

FILED
Mar 22, 2012
Secretary of State

Entity Name: NATIONAL HEALING COMMUNITY WOUND CARE, LLC

Current Principal Place of Business:

4500 SALISBURY ROAD, SUITE #300
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

5200 BELFORT RD.
SUITE 200
JACKSONVILLE, FL 32256 US

Current Mailing Address:

P.O. BOX 551187
JACKSONVILLE, FL 32255

New Mailing Address:

FEI Number: 27-3345790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOCHMAN, RODGER ESQ.
4850 T-REX AVE.
SUITE 300
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: CARINA L. DUNLAP, ASST. VICE PRESIDENT

03/22/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: NATIONAL HEALING CORPORATION
Address: 5220 BELFORT RD., SUITE 200
City-St-Zip: JACKSONVILLE, FL 32256 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: BILL WILLIAMS

SECY

03/22/2012

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