

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000004659

Entity Name: HEALTH BRIDGES LLC

FILED
Apr 13, 2012
Secretary of State

Current Principal Place of Business:

4380 CLEVELAND AVE.
SUITE C3
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

1704 FOWLER ST
FORT MYERS, FL 33901

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M.BROWN, M.ALEXANDRA
1704 FOWLER ST.
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

BROWN, ALEXANDRA
1704 FOWLER ST.
FORT MYERS, FL 33901 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: ALEXANDRA BROWN

04/13/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BROWN, LUIS O
Address: 4341 SW 25TH CT.
City-St-Zip: CAPE CORAL, FL 33914

Title: MGRM
Name: BROWN, ALEXANDRA
Address: 1704 FOWLER ST.
City-St-Zip: FORT MYERS, FL 33901

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: ALEXANDRA BROWN

RA

04/13/2012

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