2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2012
Secretary of State

DOCUMENT# L11000087186

Entity Name: HEALTH SERVICES OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

2300 N. FLORIDA MANGO ROAD
WEST PALM BEACH, FL 33409

New Principal Place of Business:

423 FERN STREET, SUITE 200
WEST PALM BEACH, FL 33401

Current Mailing Address:

2300 N. FLORIDA MANGO ROAD
WEST PALM BEACH, FL 33409

New Mailing Address:

423 FERN STREET, SUITE 200
WEST PALM BEACH, FL 33401

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOLEY, JOHN A ESQ
423 FERN STREET, STE. 200
WEST PALM BEACH, FL 33401 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: FOWLER, MICHELLE
Address: 2300 NORTH FLORIDA MANGO ROAD
City-St-Zip: WEST PALM BEACH, FL 33409 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: MICHELLE FOWLER MGR 02/16/2012

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