## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M06000002889

City-St-Zip: FRANKLIN, VA 23851

Entity Name: MID-ATLANTIC HEALTH SOLUTIONS, LLC

FILED Feb 03, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	TH MAIN STREE N, VA 23851	ET		
Current Mailing Address:			New Mailing Address:	
	TH MAIN STREE N, VA 23851	ET		
FEI Number	: 86-1065373	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
1200 SOU	PORATION SYS ITH PINE ISLAN ION, FL 33324			
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,
SIGNATU	RE:			
	Electron	c Signature of Registered Age	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	BEIER, KARL M	HOLLOW ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	MGR () BIDWELL, GLEI 31369 WILLOW		Title: Name: Address:	()Change ()Addition

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DONNA C. TAYLOR PRES 02/03/2009