

2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M07000000011

FILED
May 03, 2010
Secretary of State

Entity Name: BEACON HEALTH STRATEGIES, LLC

Current Principal Place of Business:

500 UNICORN PARK DRIVE, SUITE 401
WOBURN, MA 01801

New Principal Place of Business:

Current Mailing Address:

500 UNICORN PARK DRIVE, SUITE 401
WOBURN, MA 01801

New Mailing Address:

FEI Number: 04-3324848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZEH, DONNA M
142 SLASH PINE COURT
NEW SMYRNA BEACH, FL 32168 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: MGRM
Name: BEACON FINANCING, LLC
Address: 500 UNICORN PARK DRIVE, SUITE 401
City-St-Zip: WOBURN, MA 01801

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: TIMOTHY MURPHY

MBR

05/03/2010

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