

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003560

FILED
Mar 26, 2009
Secretary of State

Entity Name: AMERI-LIFE & HEALTH SERVICES OF ASHEVILLE LLC

Current Principal Place of Business:

2367 HENDERSONVILLE ROAD
ARDEN, NC 28704

New Principal Place of Business:

Current Mailing Address:

2367 HENDERSONVILLE ROAD
ARDEN, NC 28704

New Mailing Address:

FEI Number: 58-2661180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGHTOWER, R. NATHAN
2536 COUNTRYSIDE BLVD., 6TH FLOOR
CLEARWATER, FL 33763 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 () Delete
Name: NORTH, TIMOTHY O
Address: 2536 COUNTRYSIDE BLVD, 6TH FLOOR
City-St-Zip: CLEARWATER, FL 33763

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
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: TIMOTHY O NORTH

MGRM

03/26/2009

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