

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004018

FILED
Jan 20, 2010
Secretary of State

Entity Name: AMERILIFE & HEALTH SERVICES OF ST. PETERSBURG, LLC

Current Principal Place of Business:

111 2ND AVE NE
SUITE 301
ST PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

2536 COUNTRYSIDE BLVD 6TH FLR
CLEARWATER, FL 33763

New Mailing Address:

2536 COUNTRYSIDE BLVD
SUITE 501
CLEARWATER, FL 33763

FEI Number: 26-3242153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGHTOWER, R. NATHAN ESQ.
2536 COUNTRYSIDE BLVD 6TH FLR
CLEARWATER, FL 33763 US

Name and Address of New Registered Agent:

HIGHTOWER, R. NATHAN ESQ.
2536 COUNTRYSIDE BLVD
SUITE 501
CLEARWATER, FL 33763 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: R NATHAN HIGHTOWER ESQ

01/20/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: NORTH, TIMOTHY O
Address: 2536 COUNTRYSIDE BLVD STE 501
City-St-Zip: CLEARWATER, FL 33763

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 O NORTH

MGR

01/20/2010

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