

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000005184

Entity Name: MF HALIFAX, LLC

FILED  
Jan 26, 2010  
Secretary of State

**Current Principal Place of Business:**

2 NORTH PALAFOX STREET  
C/O GULF COAST HEALTH CARE, LLC  
PENSACOLA, FL 32502

**New Principal Place of Business:**

2 NORTH PALAFOX STREET  
PENSACOLA, FL 32502

**Current Mailing Address:**

2 NORTH PALAFOX STREET  
C/O GULF COAST HEALTH CARE, LLC  
PENSACOLA, FL 32502

**New Mailing Address:**

2 NORTH PALAFOX STREET  
PENSACOLA, FL 32502

FEI Number: 26-3754958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NATIONAL CORPORATE RESEARCH, LTD.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: FLORIDA FACILITIES, LLC  
Address: 2 NORTH PALAFOX STREET  
City-St-Zip: PENSACOLA, FL 32052

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: ERIC ROTH

MGR

01/26/2010

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