2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2012
Secretary of State

DOCUMENT# M09000003213

Entity Name: LIBERTY HEALTH NETWORK LLC

Current Principal Place of Business:

400 DORLA CT
ZEPHYR COVE, NV 89448

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12187
ZEPHYR COVE, NV 89448

New Mailing Address:

FEI Number: 27-0707951 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT, LLC.
3111 W. DR.MLK BLVD. SUITE 100-B180
TAMPA, FL 33607 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
Name: JULIE BACHMAN A LAW CORPORATION
Address: 400 DORLA CT
City-St-Zip: ZEPHYR COVE, NV 89448

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 Statues.

SIGNATURE: ANGELA GREVERT PRES 02/08/2012

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