

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000087089

Entity Name: PRIMARY HEALTH GUIDE LLC

Current Principal Place of Business:

3910 NORTHDAL BLVD
SUITE 206
TAMPA, FL 33624

Current Mailing Address:

3910 NORTHDAL BLVD
SUITE 206
TAMPA, FL 33624

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LYNN, LON D
6113 CEZANNE AVE.
LUTZ, FL 33558 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DIR
Name LYNN, LON D
Address 6113 CEZANNE AVE
City-State-Zip: LUTZ FL 33558

Title DIR
Name LYNN, JESSE H
Address 6113 CEZANNE AVE
City-State-Zip: LUTZ FL 33558

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LON LYNN

DIR

04/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date