

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000007642

**Entity Name:** SEJR HEALTH, LLC

**Current Principal Place of Business:**

12111 CAMP CREEK LANE  
HUDSON, FL 34667

**Current Mailing Address:**

12111 CAMP CREEK LANE  
HUDSON, FL 34667

**FEI Number:** 45-4281026

**Certificate of Status Desired:** No

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

MESSER, KENT A  
12111 CAMP CREEK LANE  
HUDSON, FL 34667 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 MGRM  
Name MESSER, KENT A  
Address 12111 CAMP CREEK LANE  
City-State-Zip: HUDSON FL 34667

Title MGR  
Name BAHNSEN, JINDI A  
Address 12111 CAMP CREEK LANE  
City-State-Zip: HUDSON FL 34667

*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:** KENT MESSER

MGMR

04/30/2013

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date