

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011935

Entity Name: ASSOCIATES IN MEDICINE, LLC

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

1405 SE GOLDTREE DR.
SUITE C
PORT ST. LUCIE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

1405 SE GOLDTREE DR.
SUITE C
PORT ST. LUCIE, FL 34952 US

New Mailing Address:

FEI Number: 65-1047228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINTO, JOSE
1405 SE GOLDTREE DR
C
PORT SAINT LUCIE, FL 34952 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 () Delete
Name: PINTO, JOSE
Address: 1405 SE GOLDTREE DR
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JOSE PINTO

MGR

01/19/2009

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