

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096564

Entity Name: MID-FLORIDA LBB, LLC

FILED
Feb 16, 2010
Secretary of State

Current Principal Place of Business:

1061 MEDICAL CENTER DRIVE
STE. 110
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

1061 MEDICAL CENTER DRIVE
STE 110
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 20-3539023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARMA, NEERAJ M.D.
1061 MEDICAL CTR DR STE 110
ORANGE CITY, FL 32763 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: ORTEGA, GREGORY L
Address: 803 WESTOVE PLACE
City-St-Zip: SANFORD, FL 32771

Title: MGRM
Name: CABEZA, RENE
Address: 719 TREELINE PLACE
City-St-Zip: SANFORD, FL 32771

Title: MGRM
Name: SHARMA, NEERAJ
Address: 1848 REDWOOD GROVE TERRACE
City-St-Zip: LAKE MARY, FL 32746

Title: MGRM
Name: SELASSIE, PETER
Address: 383 VISTA OAKS DR
City-St-Zip: LONGWOOD, FL 32779

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: SEAN JORDAN

CEO

02/16/2010

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