

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053246

FILED
Jan 25, 2012
Secretary of State

Entity Name: ONE SOURCE MEDICAL GROUP, LLC

Current Principal Place of Business:

2907 STATE RD. 590 STE 4
CLEARWATER, FL 33759

New Principal Place of Business:

13505 ICOT BLVD.
STE 209
CLEARWATER, FL 33760

Current Mailing Address:

2907 STATE RD. 590 STE 4
CLEARWATER, FL 33759

New Mailing Address:

13505 ICOT BLVD.
STE 209
CLEARWATER, FL 33760

FEI Number: 26-0159522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: MUELLER, ROBERT J
Address: 936 PINELLAS BAYWAY TH 6
City-St-Zip: TIERRA VERDE, FL 33715

Title: MGRM
Name: STERNBERG, ERIC M
Address: 1632 IVEY LAKE DR.
City-St-Zip: ODESSA, FL 33556

Title: MGRM
Name: SCHULENBERG, DAVID
Address: 119 PHILLIPS WAY
City-St-Zip: PALM HARBOR, FL 34683

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: ROBERT MUELLER

MGRM

01/25/2012

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