

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124110

FILED
Apr 18, 2011
Secretary of State

Entity Name: 1ST CHOICE MEDICAL FUNDING, LLC

Current Principal Place of Business:

2295 N.W. CORPORATE BLVD., #140
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2295 N.W. CORPORATE BLVD.
SUITE 140
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 61-1551502 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PRUDEN, JAMES
900 NORTH FEDERAL HIGHWAY, SUITE 410
BOCA RATON, FL 33432 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: 1ST CHOICE MEDICAL FUND, INC.
Address: 2295 N.W. CORPORATE BLVD., #140
City-St-Zip: BOCA RATON, FL 33431

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: 1ST CHOICE MEDICAL FUND, INC. MGRM 04/18/2011

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