

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000114250

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** JEFFORDS INVESTMENTS, LLC

**Current Principal Place of Business:**

1011 JEFFORDS STREET  
SUITE C  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

1011 JEFFORDS STREET  
SUITE C  
CLEARWATER, FL 33756 US

**New Mailing Address:**

1011 JEFFORDS STREET  
SUITE C  
CLEARWATER, FL 33756

**FEI Number:** 59-3455535

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORRIS III, GEORGE A MD  
1011 JEFFORDS STREET  
SUITE C  
CLEARWATER, FL 33756 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: MGR  
Name: MORRIS III, GEORGE A MD  
Address: 1011 JEFFORDS STREET, SUITE C  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR  
Name: PIAZZA, MICHAEL R MD  
Address: 1011 JEFFORDS STREET, SUITE C  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR  
Name: ABDO, RICHARD V MD  
Address: 1011 JEFFORDS STREET, SUITE C  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR  
Name: HUGHES II, WILLARD ALLEN MD  
Address: 1011 JEFFORDS STREET, SUITE C  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR  
Name: DAVIDSON, JAMES BYRON DO  
Address: 1011 JEFFORDS STREET, SUITE C  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR  
Name: MARCOTTE, ANTHONY L DO  
Address: 1011 JEFFORDS STREET, SUITE C  
City-St-Zip: CLEARWATER, FL 33756

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: GEORGE A. MORRIS III, M.D.

MGR

02/08/2012

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