

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000122930

FILED  
Mar 29, 2012  
Secretary of State

**Entity Name:** ORLANDO FAMILY PHYSICIANS, LLC

**Current Principal Place of Business:**

121 SOUTH ORANGE AVE.  
SUITE 940  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

121 SOUTH ORANGE AVE.  
SUITE 940  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number: 59-3635929

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GARCIA, JORGE L  
121 SOUTH ORANGE AVE.  
SUITE 940  
ORLANDO, FL 32801 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: GARCIA, JORGE L  
Address: 121 SOUTH ORANGE AVE.  
City-St-Zip: ORLANDO, FL 32801

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: JORGE L GARCIA

MGR

03/29/2012

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