

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000012318

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** OTT HEALTHCARE AND CONSULTING, LLC

**Current Principal Place of Business:**

495 LANTERNBACK ISLAND DR  
SATELLITE BEACH, FL 32937

**New Principal Place of Business:**

1397 WINDWARD LANE  
NICEVILLE, FL 32578

**Current Mailing Address:**

1397 WINDWARD LANE  
NICEVILLE, FL 32578

**New Mailing Address:**

FEI Number: 27-4709625

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OTT, MICHAEL  
495 LANTERNBACK ISLAND DR  
SATELLITE BEACH, FL 32937 US

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

OTT, MICHAEL  
1397 WINDWARD LANE  
NICEVILLE, FL 32578 US

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: MICHAEL OTT

04/27/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: OTT, MICHAEL C M.D.  
Address: 1397 WINDWARD LANE  
City-St-Zip: NICEVILLE, FL 32578

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: MICHAEL OTT

MGR

04/27/2012

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