

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000002258

FILED  
Mar 12, 2010  
Secretary of State

Entity Name: BNS MEDICAL, LLC

**Current Principal Place of Business:**

1410 WHITE DR SUITE A  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

1410 WHITE DR SUITE A  
TITUSVILLE, FL 32780

**New Mailing Address:**

FEI Number: 27-0276012

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LASTARZA, SHAWNA  
1410 WHITE DR SUITE A  
TITUSVILLE, FL 32780 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: HARDWICK, SUSAN  
Address: 1410 WHITE DR SUITE A  
City-St-Zip: TITUSVILLE, FL 32780

Title: MGRM  
Name: HARDWICK, WILLIAM  
Address: 1410 WHITE DR.  
City-St-Zip: TITUSVILLE, FL 32780

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: WILLIAM HARDWICK

MGRM

03/12/2010

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