

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000044357

**Entity Name:** MEDICALTOX TEAM LLC

**Current Principal Place of Business:**

2355 SURF RD.  
OCHLOCKONEE BAY, FL 32346

**Current Mailing Address:**

14325 TAMBOURINE DR  
ORLANDO, FL 32837 US

**FEI Number: 43-2038988**

**Certificate of Status Desired: No**

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

HARBISON, JOHN  
14325 TAMBOURINE DRIVE  
ORLANDO, FL 32837 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name HARBISON, JOHN T  
Address 2355 SURF RD.  
City-State-Zip: OCHLOCKONEE BAY FL 32346

Title MGRM  
Name HILLMAN, JAMES V  
Address 34 LADOGA AVENUE  
City-State-Zip: TAMPA FL 33606

Title MGRM  
Name MCCLUSKEY, DIANA  
Address 18432 EASTWYCK DR.  
City-State-Zip: TAMPA FL 33647

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JOHN T HARBISON**

**MANAGING MEMBER**

**04/30/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date