

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038384

Entity Name: STAT MEDICAL SYSTEMS, L.L.C.

Current Principal Place of Business:

1611 12TH STREET EAST STE. C
PALMETTO, FL 34221

Current Mailing Address:

1611 12TH STREET EAST STE. C
PALMETTO, FL 34221

FEI Number: 20-4680663

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAUDENSLAGER, JOHN P
1029 DELACROIX CIRCLE
NOKOMIS, FL 34275 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: JOHN P LAUDENSLAGER

04/21/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name MAYS, BASIL G
Address 1611 12TH STREET EAST STE. C
City-State-Zip: PALMETTO FL 34221

Title MGR
Name LAUDENSLAGER, JOHN P
Address 1029 DELACROIX CIR
City-State-Zip: NOKOMIS FL 34275

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN P LAUDENSLAGER

MGR

04/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date