

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000052817

Entity Name: FRIENDS AND FAMILY MEDICAL ASSOCIATES, LLC

Current Principal Place of Business:

3037 LANDOVER BLVD
SPRING HILL, FL 34608

Current Mailing Address:

3037 LANDOVER BLVD
SPRING HILL, FL 34608

FEI Number: 27-2525929

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOCK, RUTH A
3037 LANDOVER BLVD.
SPRING HILL, FL 34608 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 HOCK, RUTH A
Address 374 ROYAL PALM WAY
City-State-Zip: SPRING HILL FL 34608

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: RUTH HOCK

OWNER

01/25/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date