

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000065361

**Entity Name:** CITADEL MEDICAL ENTERPRISES, LLC

**Current Principal Place of Business:**

% CARPENTER & BERGER  
6400 N ANDREWS AVE., SUITE 370  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

% CARPENTER & BERGER  
6400 N ANDREWS AVE., SUITE 370  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 27-3767578

**Certificate of Status Desired:** No

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

CARPENTER, JOSEPH EJR.  
6400 N ANDREWS AVE., SUITE 370  
FORT LAUDERDALE, FL 33309 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           MANAGING MEMBER  
Name           JCF MEDICAL HOLDINGS, INC.  
Address        6400 N ANDREWS AVE., SUITE 370  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           MANAGING MEMBER  
Name           ZAPPA ENTERPRISES, LLC  
Address        2290 SEVEN OAKS LANE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           MANAGING MEMBER  
Name           SCOTT FRENCH MD PA  
Address        304 COPPER BAY ROAD  
City-State-Zip: NORDMAN ID 83848

Title           MANAGING MEMBER  
Name           PRADO CONSULTING SERVICES INC  
Address        949 SOUTH SOUTHLAKE DRIVE  
City-State-Zip: HOLLYWOOD FL 33019

*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:** J CLIFFORD FINDEISS

**PRESIDENT**

**04/24/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date