2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2013
Secretary of State
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Entity Name: BRIMEYER HEALTH SOLUTIONS, LLC

Current Principal Place of Business:

4120 NW 59TH AVE
GAINESVILLE, FL 32653

Current Mailing Address:

4120 NW 59TH AVE
GAINESVILLE, FL 32653

FEI Number: 27-3060096

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRIMEYER, THOMAS J
4120 NW 59TH AVE
GAINESVILLE, FL 32653 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	BRIMEYER, THOMAS J
Address	4120 NW 59TH AVE
City-State-Zip:	GAINESVILLE FL 32653

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: THOMAS J BRIMEYER OWNER 01/24/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date