

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000145042

**Entity Name:** HART CLINICAL CONSULTANTS LLC

**Current Principal Place of Business:**

230 HERON DR  
MELBOURNE BEACH, FL 32951

**Current Mailing Address:**

P O BOX 510482  
MELBOURNE BEACH, FL 32951 US

**FEI Number:** 45-4140507

**Certificate of Status Desired:** Yes

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

HART, JAMES J  
230 HERON DR  
MELBOURNE BEACH, FL 32951 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:** JAMES J HART

05/01/2013

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            OWNER  
Name            HART, JAMES J  
Address         P O BOX 510482  
City-State-Zip: MELBOURNE BEACH FL 32951

*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:** JAMES J HART

OWNER

05/01/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date