2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State

DOCUMENT# L00000003685

Entity Name: FTA TRENTON, L.C.

Current Principal Place of Business:

4423 NW 6TH PLACE
SUITE A
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

4423 NW 6TH PLACE
SUITE A
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 59-3646296 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FINLAYSON, GORDON C M.D.
4423 NW 6TH PLACE
SUITE A
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: FINLAYSON, GORDON C M.D.
Address: 4423 NW 6TH PLACE, SUITE A
City-St-Zip: GAINESVILLE, FL 32607

Title: MGRM
Name: TARRANT, DARRELL G M.D.
Address: 4423 NW 6TH PLACE, SUITE A
City-St-Zip: GAINESVILLE, FL 32607

Title: MGRM
Name: ALFINO, PAUL A M.D.
Address: 4223 NW 6TH PLACE, SUITE A
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information indicated on this 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 Statues.

SIGNATURE: PAUL A. ALFINO MGRM 02/07/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date