

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013939

FILED
Feb 19, 2009
Secretary of State

Entity Name: MEDSUP DEVELOPMENT, L.L.C.

Current Principal Place of Business:

13550 METRO PKWY
STE 102
FT MYERS, FL 33966

New Principal Place of Business:

Current Mailing Address:

C/O JOHN M WICKER PA
P.O. BOX 60205
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 65-1082730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICKER, JOHN M PA
12670 NEW BRITTANY BLVD., SUITE 101
FORT MYERS, FL 33907 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 () Delete
Name: MERCER, RANDAL L
Address: 13350 METRO PKWY STE 102
City-St-Zip: FT MYERS, FL 33966

Title: MGRM () Delete
Name: STODER, STANLEY A
Address: 13350 METRO PKWY STE 102
City-St-Zip: FT MYERS, FL 33966

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 Statutes.

SIGNATURE: RANDAL L. MERCER

MGMR

02/19/2009

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