

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000008102

**FILED**  
**Mar 15, 2010**  
**Secretary of State**

**Entity Name:** MEDPARK PROPERTIES, LLC

**Current Principal Place of Business:**

3210 SW 33RD RD  
STE 101  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

3210 SW 33RD RD  
STE 101  
OCALA, FL 34474

**New Mailing Address:**

**FEI Number:** 59-3719733

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARBER, MARY F  
9605 S MAGNOLIA AVE  
OCALA, FL 34476 US

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

KELLEY, SCOTT E  
9605 S MAGNOLIA AVE  
OCALA, FL 34476 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: SCOTT KELLEY

03/15/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BARBER, MARY F  
Address: 9605 S MAGNOLIA AVE  
City-St-Zip: Ocala, FL 34476

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 Statutes.

SIGNATURE: SCOTT KELLEY

RA

03/15/2010

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