2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2010
Secretary of State

DOCUMENT# L02000002873

Entity Name: LA FAMILIA MEDICAL CLINIC, LLC

Current Principal Place of Business:

7625 SW 62ND CT
STE. 100
OCALA, FL 34476

New Principal Place of Business:

Current Mailing Address:

7625 SW 62ND CT
STE. 100
OCALA, FL 34476

New Mailing Address:

FEI Number: 02-0551916 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTINEZ, VITERBO A
7625 SW 62ND CT
OCALA, FL 34476 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: MGRP
Name: MARTINEZ, VITERBO A M.D.
Address: 7625 SW 62ND CRT
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 Statues.

SIGNATURE: VITERBO A. MARTINEZ MGP 02/26/2010

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