## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000007046

Entity Name: PRECISION THERAPY, LLC

**FILED** Apr 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

895 BARTON BLVD. 3490 NORTH HIGHWAY US 1

SUITE B COCOA, FL 32926 ROCKLEDGE, FL 32955

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 560059 3490 NORTH HIGHWAY US 1

ROCKLEDGE, FL 329560059 COCOA, FL 32926

FEI Number: 27-0007329 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BAUGHAN, SCOTT M ESQUIRE BAUGHAN, SCOTT M ESQUIRE 895 BARTÓN BLVD. 3490 NORTH HIGHWAY US 1 COCOA, FL 32926

SUITE B ROCKLEDGE, FL 32955 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 M. BAUGHAN 04/30/2009

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

() Delete BAUGHAN, SCOTT M Name: 895 BARTON BLVD., SUITE B Address: City-St-Zip: ROCKLEDGE, FL 32955

Title: MGR () Delete Name: BAUGHAN, HERBERT A Address: 895 BARTON BLVD., SUITE B

Title: MGR () Delete

City-St-Zip:

DORNIER MEDTECH OF AMERICA Name: Address: 1155 ROBERTS BOULEVARD City-St-Zip: KENNESAW, GA 30144

ROCKLEDGE, FL 32955

Title: (X) Change ( ) Addition Name:

BAUGHAN, SCOTT M Address: 3490 NORTH HIGHWAY US 1

City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition Name: BAUGHAN, HERBERT A

Address: 3490 NORTH HIGHWAY US 1 City-St-Zip: COCOA, FL 32926

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: SCOTT M. BAUGHAN **MGMR** 04/30/2009