2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# L02000008786

Entity Name: FLORIDA OFSC, LLC

Current Principal Place of Business:

549 HEALTH BLVD.
DAYTONA BEACH, FL 32117 US

New Principal Place of Business:

Current Mailing Address:

549 HEALTH BLVD.
DAYTONA BEACH, FL 32117 US

New Mailing Address:

FEI Number: 02-0583933 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AKERS, JOHN O
549 HEALTH BLVD.
DAYTONA BEACH, FL 32114 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: MGR ( ) Delete
Name: SCHALIT, CURTIS
Address: 549 HEALTH BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MGR ( ) Delete
Name: AKERS, JOHN O
Address: 549 HEALTH BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MGR ( ) Delete
Name: LAWSON, SCOTT
Address: 549 HEALTH BOULEVARD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MGR (X) Delete
Name: BROUMAND, VISHTASB
Address: 549 HEALTH BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change ( ) Addition
Name: BROUMAND, VISHTASB
Address: 549 HEALTH BOULEVARD
City-St-Zip: DAYTONA BEACH, FL 32114

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: DAWN STIPANOVIC MEM 03/25/2009

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