

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027918

Entity Name: NFOFS HOLDINGS II, LLC

FILED  
Jan 05, 2010  
Secretary of State

## Current Principal Place of Business:

4131 UNIVERSITY BOULEVARD SOUTH STE. 1  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

4133 UNIVERSITY BOULEVARD SOUTH  
#3  
JACKSONVILLE, FL 32216

## Current Mailing Address:

4131 UNIVERSITY BOULEVARD SOUTH STE. 1  
JACKSONVILLE, FL 32216

## New Mailing Address:

4133 UNIVERSITY BOULEVARD SOUTH  
#3  
JACKSONVILLE, FL 32216

FEI Number: 57-1136350

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAXWELL, RONALD W  
4131 UNIVERSITY BOULEVARD SOUTH STE. 1  
JACKSONVILLE, FL 32216 US

## Name and Address of New Registered Agent:

MAXWELL, RONALD W  
4133 UNIVERSITY BOULEVARD SOUTH  
#3  
JACKSONVILLE, FL 32216 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:

01/05/2010

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: HARTLEY, GREGORY W DMD  
Address: 4133 UNIVERSITY BOULEVARD SOUTH #3  
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM  
Name: WOODS, DAVID D DMD  
Address: 4133 UNIVERSITY BOULEVARD SOUTH #3  
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM  
Name: GROSHAN, GREGORY J DMD  
Address: 4133 UNIVERSITY BOULEVARD SOUTH #3  
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM  
Name: O'BRIEN, DAVID A DMD  
Address: 4133 UNIVERSITY BOULEVARD SOUTH #3  
City-St-Zip: JACKSONVILLE, FL 32216

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: GREGORY W HARTLEY DMD

MGRM

01/05/2010

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