

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030926

FILED
Jan 16, 2012
Secretary of State

Entity Name: CENTRAL FLORIDA MEDICAL LEASING, L.L.C.

Current Principal Place of Business:

160 E LAKE HOWARD DR
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

160 E LAKE HOWARD DR
C/O LUCINDA SHELBY
WINTER HAVEN, FL 33880

New Mailing Address:

160 E LAKE HOWARD DR
WINTER HAVEN, FL 33880

FEI Number: 43-1983588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAMBAUGH, ROBERT J
99 SIXTH ST SW
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

SHELBY, LUCINDA K
160 EAST LAKE HOWARD DRIVE
WINTER HAVEN, FL 33881 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: LUCINDA K. SHELBY

01/16/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: LYLE, DONNA
Address: 160 E. LAKE HOWARD DR
City-St-Zip: WINTER HAVEN, FL 33881

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: LUCINDA K. SHELBY

RA

01/16/2012

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