

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013254

Entity Name: MOBILE PODIATRY CARE, LLC

FILED
Feb 26, 2010
Secretary of State

Current Principal Place of Business:

1151 LANCER LANE
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

1151 LANCER LANE
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 11-3696517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WARD, ROBERT J DPM
1151 LANCER LANE
TARPON SPRINGS, FL 34689 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: MGRM
Name: WARD, ROBERT J DPM
Address: 1151 LANCER LANE
City-St-Zip: TARPON SPRINGS, FL 34689

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: ROBERT J. WARD

DPM

02/26/2010

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