

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000015060

Entity Name: ADMD, LLC

**FILED**  
**May 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

200- 2ND AVENUE SOUTH  
STE 423  
ST PETERSBURG, FL 33701

**New Principal Place of Business:**

380-A 34TH STREET NORTH  
ST PETERSBURG, FL 33713

**Current Mailing Address:**

200- 2ND AVENUE SOUTH  
STE 423  
ST PETERSBURG, FL 33701

**New Mailing Address:**

PO BOX 16447  
ST PETERSBURG, FL 33733 US

FEI Number: 37-1470032

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSS, CARY  
6987 EAST FOWLER AVENUE  
TAMPA, FL 33617 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  
Name: REDMOND, KATHY  
Address: PO BOX 16447  
City-St-Zip: ST PETERSBURG, FL 33733 US

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: E K REDMOND

MGR

05/02/2011

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