

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036202

Entity Name: CAMERON CLINICS LLC

FILED
Jan 13, 2010
Secretary of State

Current Principal Place of Business:

6586 HYPOLUXO ROAD, SUITE #334
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

6586 HYPOLUXO ROAD, SUITE #334
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 54-2130864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMERON, BLAINE S
28 W FLAGLER STREET STE 202
MIAMI, FL 33130 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: CAMERON, BLAINE S DR
Address: 6513 MARBLETREE
City-St-Zip: LAKE WORTH, FL 33467

Title: MGRM
Name: CAMERON, MARSHA MRS
Address: 10680 SUNSET STRIP
City-St-Zip: SUNRISE, FL 33322

Title: MGRM
Name: CAMERON, SHANE M MR
Address: 6513 MARBLETREE LANE
City-St-Zip: LAKE WORTH, FL 33467

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: DR. BLAINE S. CAMERON

MGRM

01/13/2010

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