

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000000748

Entity Name: HYDROMEDICS, LLC

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3020 KANANWOOD COURT  
SUITE 1000  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

3020 KANANWOOD COURT  
SUITE 10000  
OVIEDO, FL 32765

**New Mailing Address:**

3020 KANANWOOD COURT  
SUITE 1000  
OVIEDO, FL 32765

FEI Number: 20-0563700

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

F & L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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: COUCH, RANDALL L  
Address: 3020 KANANWOOD COURT SUITE 1000  
City-St-Zip: OVIEDO, FL 32765

Title: MGR  
Name: ANDERSEN, WILLIAM T  
Address: 3020 KANANWOOD COURT SUITE 1000  
City-St-Zip: OVIEDO, FL 32765

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: RANDALL L COUCH

MGR

02/23/2010

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