

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000047764

Entity Name: GEO-MED, LLC

FILED
Mar 10, 2008
Secretary of State

Current Principal Place of Business:

302 E. GREENTREE LANE
LAKE MARY, FL 32746

New Principal Place of Business:

1053 MAITLAND CENTER COMMONS BLVD
SUITE 100
MAITLAND, FL 32751

Current Mailing Address:

478 EAST ALTAMONTE DRIVE
PMB 235, SUITE #108
ALTAMONTE SPRINGS, FL 327014622 US

New Mailing Address:

FEI Number: 38-3706824 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORZINE, CHRISTOPHER S
15436 OSPREY GLEN DR
LITHIA, FL 33547 US

Name and Address of New Registered Agent:

CORZINE, CHRISTOPHER S
1053 MAITLAND CENTER COMMONS BLVD., STE100
LITHIA, FL 33547 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: CHRISTOPHER S. CORZINE

03/10/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR. () Delete
Name: CORZINE, CHRISTOPHER
Address: 302 E. GREENTREE LANE
City-St-Zip: LAKE MARY, FL 32746

Title: MR. () Delete
Name: LOCKE, MICHAEL
Address: 302 E. GREENTREE LANE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: CORZINE, CHRISTOPHER
Address: 15436 OSPREY GLEN DR.
City-St-Zip: LITHIA, FL 33547

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: CHRISTOPHER S. CORZINE

MGRM

03/10/2008

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