

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069006

FILED
Mar 02, 2011
Secretary of State

Entity Name: MEDICAL COMPLEX, L.L.C.

Current Principal Place of Business:

6914 EAST FOWLER AVE, SUITE J
C/O A. S. WEEKLEY, JR.
TAMPA, FL 336171705 US

New Principal Place of Business:

Current Mailing Address:

6914 EAST FOWLER AVE, SUITE J
C/O A. S. WEEKLEY, JR.
TAMPA, FL 336171705 US

New Mailing Address:

FEI Number: 20-1646848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKLEY, JR., A.S.
2619 BAYSHORE BLVD.
TAMPA, FL 336297317 US

Name and Address of New Registered Agent:

WEEKLEY, A S JR
2619 BAYSHORE BLVD.
TAMPA, FL 336297317 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: A S WEEKLEY, JR.

03/02/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: WEEKLEY, A S JR
Address: 2619 BAYSHORE BLVD.
City-St-Zip: TAMPA, FL 336297317 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: A S WEEKLEY, JR.

MGR

03/02/2011

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