

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023234

FILED
Mar 17, 2010
Secretary of State

Entity Name: PHYSICIAN ASSET RECOVERY, LLC

Current Principal Place of Business:

4932 SUNBEAM ROAD, SUITE 100
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

4932 SUNBEAM ROAD, SUITE 100
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 61-1484573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHORSTEIN, MARK CPA
8265 BAYBERRY ROAD
JACKSONVILLE, FL 32256 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: MEMB
Name: GOTTLIEB, MEL MR.
Address: 4932 SUNBEAM RD STE #100
City-St-Zip: JACKSONVILLE, FL 32257

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: MELVIN GOTTLIEB

MEMB

03/17/2010

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