

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032527

Entity Name: TRIAD OF OCALA, LLC

FILED
Mar 11, 2010
Secretary of State

Current Principal Place of Business:

2605 SW 33RD ST
STE 200
OCALA, FL 34471

Current Mailing Address:

PO BOX 2495
OCALA, FL 34478

New Principal Place of Business:

2605 SW 33RD ST
STE 200
OCALA, FL 34471 US

New Mailing Address:

PO BOX 2495
OCALA, FL 34478 US

FEI Number: 02-0742610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRKPATRICK, KENNETH
2605 SW 33RD ST
#200
OCALA, FL 34471 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: HOLIK, RENE
Address: PO BOX 9236
City-St-Zip: JACKSON, WY 83002 US

Title: MGR
Name: DEBENEDICTY, GEORGE S
Address: PO BOX 772532
City-St-Zip: OCALA, FL 34477 US

Title: MGR
Name: MATTHEWS, PAUL I
Address: 2296 BUCKLAND AVE
City-St-Zip: FREMONT, OH 43420 US

Title: MGR
Name: HOLIK, ROBERT
Address: PO BOX 9236
City-St-Zip: JACKSON, WY 83002 US

Title: MGRM
Name: MALMAN, MYLES H
Address: 3107 STIRLING RD STE 101
City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: MGRM
Name: MALMAN, JILL A
Address: 3107 STIRLING RD STE 101
City-St-Zip: FORT LAUDERDALE, FL 33312 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: GEORGE S. DEBENEDICTY

MGR

03/11/2010

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