

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000061661

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** BMS OF CENTRAL FL. L.L.C.

**Current Principal Place of Business:**

4807 LAKES EDGE LANE  
KISSIMMEE, FL 34744 US

**New Principal Place of Business:**

**Current Mailing Address:**

4807 LAKES EDGE LANE  
KISSIMMEE, FL 34744 US

**New Mailing Address:**

FEI Number: 20-3063047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BAXTER, GARY  
4807 LAKES EDGE LANE  
KISSIMMEE, FL 34744 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: MGRM  
Name: BAXTER, GARY  
Address: 4807 LAKES EDGE LANE  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM  
Name: BAXTER, SANDRA  
Address: 4807 LAKES EDGE LANE  
City-St-Zip: KISSIMMEE, FL 34744

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: SANDRA BAXTER

MGRM

04/16/2012

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