

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083100

FILED
Jan 20, 2008
Secretary of State

Entity Name: MARHOLIN MEDICAL INSTITUTE, LLC

Current Principal Place of Business:

535 APPELEYARD DRIVE
TALLAHASSEE, FL 32304 US

New Principal Place of Business:

Current Mailing Address:

6252 COMMERCIAL WAY
#301
BROOKSVILLE, FL 34613 US

New Mailing Address:

FEI Number: 20-3397401 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARHOLIN, MAURICE
6252 COMMERCIAL WAY
#301
BROOKSVILLE, FL 34613 US

Name and Address of New Registered Agent:

MARHOLIN, MAURICE D
6252 COMMERCIAL WAY
#301
BROOKSVILLE, FL 34613 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: MAURICE D. MARHOLIN

01/20/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MARHOLIN, MAURICE
Address: 6252 COMMERCIAL WAY, #301
City-St-Zip: BROOKSVILLE, FL 34613 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MARHOLIN, MAURICE D
Address: 6252 COMMERCIAL WAY, #301
City-St-Zip: BROOKSVILLE, FL 34613 US

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: MAURICE D. MARHOLIN

MGR

01/20/2008

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