2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2012
Secretary of State

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Entity Name: GAINESVILLE PSYCHIATRY AND FORENSIC SERVICES, L.L.C.

Current Principal Place of Business:

1026 SW 2ND AVENUE
SUITE-C
GAINESVILLE, FL 32601

New Principal Place of Business:

1103 SW 2ND AVENUE
GAINESVILLE, FL 32601

Current Mailing Address:

1026 SW 2ND AVENUE
SUITE-C
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 20-3611957 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: ADU, LAWRENCE M.D.
Address: 19056 NW 75TH AVENUE
City-St-Zip: ALACHUA, FL 32615

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 Statues.

SIGNATURE: LAWRENCE ADU MD 03/28/2012

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