

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000115249

Entity Name: J. MICHAEL GREGSON, LLC

FILED
Apr 22, 2011
Secretary of State

Current Principal Place of Business:

2462 SE MARIUS STREET
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

2462 SE MARIUS STREET
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 20-3879446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAVEFRONT CLINICAL MANAGEMENT SERVICES
50 SO US HWY 1 SUITE 213
JJ, FL 33477 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: GREGSON, JOHN MICHAEL MGR
Address: 2462 SE MARIUS STREET
City-St-Zip: PORT ST. LUCIE, FL 34952

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: JOHN MICHAEL GREGSON

MGR

04/22/2011

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