

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000032823

Entity Name: ORTHOTICS CHOICE, LLC

FILED  
Apr 22, 2009  
Secretary of State

## Current Principal Place of Business:

451 E. AIRPORT BLVD.  
SANFORD, FL 32773

## New Principal Place of Business:

## Current Mailing Address:

451 E. AIRPORT BLVD.  
SANFORD, FL 32773

## New Mailing Address:

FEI Number: 20-4595562

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BOYLE, JOSEPH  
451 E. AIRPORT BLVD.  
SANFORD, FL 32773 US

## Name and Address of New Registered Agent:

BOYLE, MELISSA  
451 E. AIRPORT BLVD.  
SANFORD, FL 32773 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: MELISSA BOYLE

04/22/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: DR ( ) Delete  
Name: BOYLE, JOSEPH  
Address: 451 E. AIRPORT BLVD  
City-St-Zip: SANFORD, FL 32773

Title: MGR ( ) Delete  
Name: NALLEY, MARK  
Address: 451 E. AIRPORT BLVD  
City-St-Zip: SANFORD, FL 32773

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BOYLE, MELISSA  
Address: 451 E. AIRPORT BLVD  
City-St-Zip: SANFORD, FL 32773

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MELISSA BOYLE

MGR

04/22/2009

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