

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036410

FILED
Jan 10, 2012
Secretary of State

Entity Name: CENTRAL FLORIDA RHEUMATISM & OSTEOPOROSIS, LLC

Current Principal Place of Business:

964 SOUTH WICKHAM RD, STE 1
WEST MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

964 SOUTH WICKHAM RD, STE 1
WEST MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 20-4681773

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEL ROSARIO CABRAL, LUIS
2632 GLASBERN CIRCLE
WEST MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

DINHO, ELAINE B
4875 N. WICKHAM ROAD
SUITE 107
MELBOURNE, FL 32940 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: ELAINE B. DINHO

01/10/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DEL ROSARIO CABRAL, LUIS A MD
Address: 2632 GLASBERN CIRCLE
City-St-Zip: WEST MELBOURNE, FL 32904 US

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: LUIS DELROSARIO CABRAL

MGRM

01/10/2012

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