

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085393

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** TIMBER RIDGE REGIONAL HEARING CENTER, LLC

**Current Principal Place of Business:**

9401 SW STATE ROAD 200  
BUILDING 6000, SUITE 6001  
OCALA, FL 34481 US

**New Principal Place of Business:**

**Current Mailing Address:**

9401 SW STATE ROAD 200  
BUILDING 6000, SUITE 6001  
OCALA, FL 34481 US

**New Mailing Address:**

**FEI Number:** 20-5490149

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUNT, WILLIAM J  
9401 SW STATE ROAD 200  
BUILDING 6000, SUITE 6001  
OCALA, FL 34481 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 ( ) Delete  
Name: HUNT, WILLIAM J  
Address: 9401 SW STATE ROAD 200 #6001  
City-St-Zip: OCALA, FL 34481 US

Title: MGRM ( ) Delete  
Name: HUNT, MARILYN M  
Address: 9401 SW STATE ROAD 200 #6001  
City-St-Zip: OCALA, FL 34481 US

**ADDITIONS/CHANGES:**

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

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: MARILYN M. HUNT

MGR

04/29/2008

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