2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2010
Secretary of State

DOCUMENT# L06000087001

Entity Name: THE ANCHOR CLINIC LLC

Current Principal Place of Business:

229 SOUTH BAYLEN STREET STE 2
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

229 SOUTH BAYLEN STREET STE 2
PENSACOLA, FL 32502

New Mailing Address:

FEI Number: 37-1528563 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GROOM, KEVIN N
229 SOUTH BAYLEN STREET
SUITE 2
PENSACOLA, FL 32502 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: PRES
Name: GROOM, KEVIN N
Address: 229 SOUTH BAYLEN STREET STE 2
City-St-Zip: PENSACOLA, FL 32502

Title: VP
Name: FRASER, DOUGLAS H
Address: 229 SOUTH BAYLEN STREET STE 2
City-St-Zip: PENSACOLA, FL 32502

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: KEVIN N. GROOM, PHD PRES 04/26/2010

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