2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 03, 2008
Secretary of State

DOCUMENT# L06000110156

Entity Name: GENMED, LLC

Current Principal Place of Business:

5070 FOREST DALE DRIVE
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

5070 FOREST DALE DRIVE
LAKE WORTH, FL 33467

New Mailing Address:

5070 FOREST DALE DRIVE
LAKE WORTH, FL 33449

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDREWS, ROBIN E
5070 FOREST DALE DRIVE
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

ANDREWS, ROBIN E
5070 FOREST DALE DRIVE
LAKE WORTH, FL 33449 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: 01/03/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ANDREWS, ROBIN E
Address: 5070 FOREST DALE DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US

Title: MGR ( ) Delete
Name: ANDREWS, MARK
Address: 5070 FOREST DALE DRIVE
City-St-Zip: LAKE WORTH, FL 33467 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: ROBIN E. ANDREWS MGR 01/03/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date