

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117105

Entity Name: OSPREY MEDICAL LLC

FILED
Jan 05, 2010
Secretary of State

Current Principal Place of Business:

1710 CHALLEN AVE
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

1710 CHALLEN AVE
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 20-8015560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLARY, GLEN
BOYD & JENERETTE, P.A.
201 NORTH HOGAN STREET SUITE 400
JACKSONVILLE, FL 32202 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: MGR
Name: MCCLARY, GLEN
Address: 1710 CHALLEN AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: MGR
Name: BROWN, CHRIS
Address: 1710 CHALLEN AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: MGRM
Name: OSPREY HOLDINGS, LLC
Address: 1710 CHALLEN AVE.
City-St-Zip: JACKSONVILLE, FL 32205

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: GLEN MCCLARY

MEMB

01/05/2010

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