

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120289

Entity Name: VALUHEALTHMD L.L.C.

FILED  
Jan 08, 2011  
Secretary of State

**Current Principal Place of Business:**

8204 TIVOLI DRIVE  
ORLANDO, FL 32836

**New Principal Place of Business:**

**Current Mailing Address:**

8204 TIVOLI DRIVE  
ORLANDO, FL 32836

**New Mailing Address:**

FEI Number: 20-8138122

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ROBBINS, WILLIAM JAY J  
8204 TIVOLI DRIVE  
ORLANDO, FL 32836 US

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

ROBBINS, WILLIAM J  
8204 TIVOLI DRIVE  
ORLANDO, FL 32836 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: WILLIAM J ROBBINS

01/08/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROBBINS, WILLIAM J  
Address: 8204 TIVOLI DRIVE  
City-St-Zip: ORLANDO, FL 32836

Title: MGR  
Name: ROBBINS, REBECCA C  
Address: 8204 TIVOLI DRIVE  
City-St-Zip: ORLANDO, FL 32836

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: WILLIAM J ROBBINS

MGRM

01/08/2011

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