

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000007625

FILED
Apr 28, 2008
Secretary of State

Entity Name: FAMILY FIRST MEDICAL CARE, LLC

Current Principal Place of Business:

1012 DRUID ROAD EAST
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

1012 DRUID ROAD EAST
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 20-8283403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, PATRICK M ESQ.
C/O O'CONNOR & ASSOCIATES
1250 S. BELCHER ROAD, SUITE 160
LARGO, FL 33771 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: KRISHNAIYER, JAYAM
Address: 2365 HADDON HALL PL
City-St-Zip: CLEARWATER, FL 33764

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: JAYAM K IYER

MGRM

04/28/2008

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