

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000024017

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** QUORUM SERVICES OF FLORIDA, LLC

**Current Principal Place of Business:**

3225 S. DALE MABRY HWY  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

405 S DALE MABRY HWY  
STE 241  
TAMPA, FL 33609

**New Mailing Address:**

**FEI Number:** 20-8564935

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FLORIDA INCORPORATIONS, INC.  
8875 HIDDEN RIVER PKWY STE 300  
TAMPA, FL 33637 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:** MGRM  
**Name:** BROOKER, SHAUN  
**Address:** 405 S DALE MABRY HWY STE 241  
**City-St-Zip:** TAMPA, FL 33609

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: SHAUN BROOKER

MGRM

04/14/2011

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