2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2011
Secretary of State

DOCUMENT# L07000030705

Entity Name: INTEGRATED MEDICAL EVALUATIONS LLC

Current Principal Place of Business:

2406 COLONIAL AVE.
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5193
ANDERSON, SC 29623

New Mailing Address:

902 NORTHSHORE COURT
HIGH POINT, NC 27265

FEI Number: 20-8692991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHODAZECK, THELMA J
2406 COLONIAL AVE.
LAKELAND, FL 33801 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: REITER, TODD M
Address: 300 GATEWOOD AVENUE
City-St-Zip: HIGH POINT, NC 27262 US

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 Statues.

SIGNATURE: TODD M. REITER DR. 03/23/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date