

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000035786

Entity Name: ORTHODYNAMIX, LLC

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10302 DEERWOOD PARK BLVD.  
SUITE 209  
JACKSONVILLE, FL 322564121

**New Principal Place of Business:**

**Current Mailing Address:**

10302 DEERWOOD PARK BLVD.  
SUITE 209  
JACKSONVILLE, FL 322564121

**New Mailing Address:**

FEI Number: 20-8783031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DENNIS, WILLIAM G  
10302 DEERWOOD PARK BLVD.  
SUITE 209  
JACKSONVILLE, FL 322564121 US

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

DENNIS, SHARON C  
10302 DEERWOOD PARK BLVD.  
SUITE 209  
JACKSONVILLE, FL 322564121 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: SHARON C DENNIS

04/25/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DENNIS, SHARON C  
Address: 10302 DEERWOOD PARK BLVD., STE. 209  
City-St-Zip: JACKSONVILLE, FL 322564121

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: SHARON C DENNIS

MGRM

04/25/2012

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