

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000036625

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Entity Name:** WORMAN FOOT & ANKLE ASSOCIATES, LLC

**Current Principal Place of Business:**

7500 BRYAN DAIRY ROAD  
SUITE B  
LARGO, FL 33777

**New Principal Place of Business:**

7500 BRYAN DAIRY ROAD  
SUITE B  
LARGO, FL 33777 UN

**Current Mailing Address:**

7500 BRYAN DAIRY ROAD  
SUITE B  
LARGO, FL 33777

**New Mailing Address:**

**FEI Number:** 90-0317231      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WORMAN, JEFFREY A DPM  
10650 PARK PLACE DR  
LARGO, FL 33778 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:** WORMAN, JEFFREY A DPM  
**Address:** 10650 PARK PLACE DR  
**City-St-Zip:** LARGO, FL 33778

**Title:** MGRM  
**Name:** WORMAN, BELLA R DPM  
**Address:** 10650 PARK PLACE DR  
**City-St-Zip:** LARGO, FL 33778

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: BELLA WORMAN

DR

03/27/2012

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