

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049050

FILED
May 03, 2010
Secretary of State

Entity Name: MEDICAL INFORMATION BANK, LLC

Current Principal Place of Business:

355 MONROE DRIVE, #203
SARASOTA, FL 34236

New Principal Place of Business:

3783 BENEVA OAKS BLVD
SARASOTA, FL 34238

Current Mailing Address:

355 MONROE DRIVE, #203
SARASOTA, FL 34236

New Mailing Address:

3783 BENEVA OAKS BLVD
SARASOTA, FL 34238

FEI Number: 26-1817591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HANAN, BENJAMIN R
240 SOUTH PINEAPPLE AVE., 10TH FLOOR
SARASOTA, FL 34236 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: STEIN, DANIEL P
Address: 3783 BENEVA OAKS BLVD
City-St-Zip: SARASOTA, FL 34238

Title: MGR
Name: STEIN, BARRY
Address: 3783 BENEVA OAKS BLVD
City-St-Zip: SARASOTA, FL 34238

Title: MGR
Name: HANAN, BENJAMIN R
Address: 3783 BENEVA OAKS BLVD
City-St-Zip: SARASOTA, FL 34238

Title: MGR
Name: LOCKWOOD, JACOB
Address: 3783 BENEVA OAKS BLVD
City-St-Zip: SARASOTA, FL 34238

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: DANIEL P. STEIN

CEO

05/03/2010

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