## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000054855

Entity Name: FLDIC PRACTICE SOLUTIONS, LLC

FILED May 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6981 LAKE DEVONWOOD DRIVE FT. MYERS, FL 33908

Current Mailing Address: New Mailing Address:

6981 LAKE DEVONWOOD DRIVE 4655 SALISBURY ROAD FT. MYERS, FL 33908 110 JACKSONVILLE, FL 32256

FEI Number: 26-0813815 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:

KAGAN, ELIZABETH 6981 LAKE DEVONWOOD DRIVE FT MYERS, FL 33908 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: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FLORIDA DOCTORS HOLD, ING COMPANY
 Name:

 Address:
 6982 LAKE DEVONWOOD DRIVE
 Address:

 City-St-Zip:
 FT MYERS, FL 33908
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ELIZABETH KAGAN MGR 05/06/2008