2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2011
Secretary of State

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Entity Name: LINKS MEDICAL ASSOCIATES, LLC

Current Principal Place of Business:

13506 SUMMERPORT VILLAGE PKWY
SUITE 320
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

13506 SUMMERPORT VILLAGE PKWY #320
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 26-1213388 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OFOKANSI, DAVIDSON
13506 SUMMERPORT VILLAGE PKWY
SUITE 320
ORLANDO, FL 34786 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: OFOKANSI, DAVIDSON C
Address: 13506 SUMMERPORT VILLAGE PKWY, #320
City-St-Zip: ORLANDO, FL 34786

Title: MGRM
Name: OFOKANSI, ESTHER I
Address: 13506 SUMMERPORT VILLAGE PKWY #320
City-St-Zip: ORLANDO, FL 34786

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: DAVIDSON OFOKANSI MGRM 04/12/2011

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