

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076802

FILED
Feb 29, 2012
Secretary of State

Entity Name: FLORIDA HEALTH LAW CENTER, LLC

Current Principal Place of Business:

3501 S. UNIVERSITY DRIVE
SUITE 10
DAVIE, FL 33328 US

New Principal Place of Business:

10200 W. STATE ROAD 84
SUITE 106
DAVIE, FL 33324 US

Current Mailing Address:

3501 S. UNIVERSITY DRIVE
SUITE 10
DAVIE, FL 33328 US

New Mailing Address:

10200 W. STATE ROAD 84
SUITE 106
DAVIE, FL 33324 US

FEI Number: 83-0504911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURENCE, JODI
3501 S. UNIVERSITY DRIVE
SUITE 10
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

HEALTH LAW OFFICE OF JODI LAURENCE PA
10200 W. STATE ROAD 84
SUITE 106
DAVIE, FL 33324 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: JODI LAURENCE

02/29/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: HEALTH LAW OFFICE OF JODI LAURENCE P.A.
Address: 10200 W. STATE ROAD 84, SUITE 106
City-St-Zip: DAVIE, FL 33324 US

Title: MGR
Name: HEALTH LAW OFFICE OF LEE LASRIS, P.A.
Address: 10200 W. STATE ROAD 84, SUITE 106
City-St-Zip: DAVIE, FL 33324

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: JODI LAURENCE

MGR

02/29/2012

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