

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000079436

FILED
Jan 05, 2011
Secretary of State

Entity Name: SOUTHEAST FLORIDA PAIN MANAGEMENT LLC

Current Principal Place of Business:

41 E COMMERCIAL BLVD
FT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

41 E COMMERCIAL BLVD
FT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 22-3967140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARPENTER, DAVID M
41 E COMMERCIAL BLVD
FT LAUDERDALE, FL 33334 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: PRES
Name: CARPENTER, DAVID M JR
Address: 41 E COMMERCIAL BLVD
City-St-Zip: FT LAUDERDALE, FL 33334

Title: S
Name: CARPENTER, DAVID M SR
Address: 41 E COMMERCIAL BLVD
City-St-Zip: FT LAUDERDALE, FL 33334

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: DAVID M CAPRENTER, JR

PRES

01/05/2011

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