

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000086737

Entity Name: MEDI TPA, LLC

FILED
Mar 22, 2008
Secretary of State

Current Principal Place of Business:

138 NORTH ONE DRIVE
SUITE B
SAINT AUGUSTINE, FL 32095 US

Current Mailing Address:

138 NORTH ONE DRIVE
SUITE B
SAINT AUGUSTINE, FL 32095 US

New Principal Place of Business:

167 PALENCIA VILLAGE DRIVE
SUITE 101
SAINT AUGUSTINE, FL 32095 US

New Mailing Address:

167 PALENCIA VILLAGE DRIVE
SUITE 101
SAINT AUGUSTINE, FL 32095 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BULLOCK, KRISTIN
138 NORTH ONE DRIVE
SUITE B
SAINT AUGUSTINE, FL 32095 US

Name and Address of New Registered Agent:

BULLOCK, KRISTIN
167 PALENCIA VILLAGE DRIVE
SUITE 101
SAINT AUGUSTINE, FL 32095 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: KRISTIN BULLOCK

03/22/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BULLOCK, KRISTIN
Address: 138 NORTH ONE DRIVE SUITE B
City-St-Zip: SAINT AUGUSTINE, FL 32095 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BULLOCK, KRISTIN
Address: 167 PALENCIA VILLAGE DRIVE STE 101
City-St-Zip: SAINT AUGUSTINE, FL 32095 US

Title: MGR () Change (X) Addition
Name: MCCLURE, WILLIAM
Address: 167 PALENCIA VILLAGE DRIVE STE 101
City-St-Zip: SAINT AUGUSTINE, FL 32095 US

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: WILLIAM MCCLURE

MGR

03/22/2008

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