

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000092318

FILED
Apr 22, 2010
Secretary of State

Entity Name: GULF COAST ORTHOTICS & PROSTHETICS CENTER, LLC

Current Principal Place of Business:

1203 JACARANDA BLVD.
VENICE, FL 34292 FL

New Principal Place of Business:

Current Mailing Address:

1203 JACARANDA BLVD.
VENICE, FL 34292 FL

New Mailing Address:

FEI Number: 26-0868757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRIDEMORE & ASSOCIATES CPAS PA
229 TAMiami TRAIL S
SUITE 1
VENICE, FL 34285 US

Name and Address of New Registered Agent:

RODERIQUES, LILLIANE M OWNER
1203 JACARANDA BLVD
VENICE, FL 34292 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: LILLIANE RODERIQUES

04/22/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RODERIQUES, KEITH A
Address: 1203 JACARANDA BLVD.
City-St-Zip: VENICE, FL 34292 FL

Title: MGR
Name: RODERIQUES, LILLIANE M
Address: 1203 JACARANDA BLVD.
City-St-Zip: VENICE, FL 34292 FL

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: LILLIANE RODERIQUES

OWNE

04/22/2010

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