2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2011
Secretary of State

DOCUMENT# L07000099074

Entity Name: THE CENTER FOR MEDICAL EDUCATION AND RESEARCH, LLC

Current Principal Place of Business:

2353 WOODLAWN CIR WEST
ST PETERSBURG, FL 33704

New Principal Place of Business:

Current Mailing Address:

2353 WOODLAWN CIR WEST
ST PETERSBURG, FL 33704

New Mailing Address:

FEI Number: 30-0445970 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALLY'S TAX SERVICE
2375 YORK ST N
ST PETERSBURG, FL 33710 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: HENDERSON, TINA
Address: 2353 WOODLAWN CIR WEST
City-St-Zip: ST PETERSBURG, FL 33704

Title: PRES
Name: HENDERSON, PHILIP W
Address: 2353 WOODLAWN CIR WEST
City-St-Zip: ST PETERSBURG, FL 33704

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: PHILIP W HENDERSON PRES 04/27/2011

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