

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000016698

Entity Name: RX PAPERLESS, LLC

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4511 N. HIMES AVE.  
SUITE 200  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18031  
TAMPA, FL 33679

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BENNETT, BRADFORD H  
4006 W. AZEELE ST.  
TAMPA, FL 33609 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: MGRM  
Name: HANS, LEO P  
Address: 6705 PEMBERTON VIEW DR.  
City-St-Zip: SEFFNER, FL 33584

Title: MGRM  
Name: BENNETT, TODD C  
Address: 323 23RD AVE. N  
City-St-Zip: ST. PETERSBURG, FL 33704

Title: MGRM  
Name: BENNETT, BRADFORD H  
Address: 4006 W. AZEELE ST.  
City-St-Zip: TAMPA, FL 33609

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: BRADFORD H BENNETT

MGRM

04/02/2010

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