

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000026606

FILED
Mar 03, 2010
Secretary of State

Entity Name: COMPREHENSIVE VEIN CENTER, LLC

Current Principal Place of Business:

1501 U.S. HWY 441 A STE 1404
THE VILLAGE, FL 32159

New Principal Place of Business:

Current Mailing Address:

1501 U.S. HWY 441 A STE 1404
THE VILLAGE, FL 32159

New Mailing Address:

FEI Number: 26-2167439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRAN, TOM T
2207 E. MICHIGAN AVENUE
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

TRAN, TOM T
12114 EAGLE POINT COURT
LEESBURG, FL 34788 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: TOM TRAN

03/03/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: TRAN, TOM T PA
Address: 12114 EAGLE POINT COURT
City-St-Zip: LEESBURG, FL 34788

Title: MGRM
Name: RICHARDS, MICHAEL G
Address: 1618 MIST FLOWER LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGR
Name: DUFFE, YVONNE
Address: 14160 EDEN ISLE BLVD.
City-St-Zip: WINDERMERE, FL 34786

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: TOM TRAN

MGRM

03/03/2010

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