

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000033421

Entity Name: EMR NEW PORT, LLC

**FILED**  
**Apr 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7041 U.S. HIGHWAY 19 NORTH  
NEW PORT RICHEY, FL 34652

**New Principal Place of Business:**

**Current Mailing Address:**

151 BARBADOS AVE.  
TAMPA, FL 33606

**New Mailing Address:**

FEI Number: 26-2311726

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

JORGENSEN, SCOTT  
151 BARBADOS AVE  
TAMPA, FL 33606 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: SCOTT JORGENSEN

04/18/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MMBR  
Name: JORGENSEN, SCOTT MGR  
Address: 151 BARBADOS AVE.  
City-St-Zip: TAMPA, FL 33606 US

Title: MMBR  
Name: JORGENSEN, ANA MGR  
Address: 151 BARBADOS AVE.  
City-St-Zip: TAMPA, FL 33606

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: SCOTT JORGENSEN

MGR

04/18/2010

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