

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000052025

FILED
Apr 25, 2011
Secretary of State

Entity Name: COURTESY MEDICAL NETWORK, LLC

Current Principal Place of Business:

404 BARCLAY AVENUE
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

404 BARCLAY AVENUE
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 71-1051163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARGOLIS, BRIAN A
404 BARCLAY AVENUE
ALTAMONTE SPRINGS, FL 32701 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: MGR
Name: MARGOLIS, BRIAN A
Address: 404 BARCLAY AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: BRIAN A MARGOLIS

MGR

04/25/2011

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