

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000056954

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** BLOCK MEDICAL CONSULTING, LLC

**Current Principal Place of Business:**

13906 NW 15TH LANE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

11834 COUNTY ROAD 101  
SUITE 100A  
THE VILLAGES, FL 32162

**Current Mailing Address:**

13906 NW 15TH LANE  
GAINESVILLE, FL 32606

**New Mailing Address:**

3511 WEDGEWOOD LANE  
PMB 107  
THE VILLAGES, FL 32162

**FEI Number:** 26-2942359

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLOCK, DALE J  
13906 NW 15TH LANE  
GAINESVILLE, FL 32606 US

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

BLOCK, DALE J MD  
13906 NW 15TH LANE  
GAINESVILLE, FL 32606 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: DALE J. BLOCK, MD

01/11/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BLOCK, DALE J MD  
Address: 13906 NW 15TH LANE  
City-St-Zip: GAINESVILLE, FL 32606

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: DALE J. BLOCK, MD

MGRM

01/11/2010

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