

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000057696

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** PARKVIEW MEDICAL GROUP, LLC

**Current Principal Place of Business:**

5379 RIVERROCK RD  
LAKELAND, FL 33809 US

**New Principal Place of Business:**

**Current Mailing Address:**

6700 S. FLORIDA AVE, STE 25  
LAKELAND, FL 33813 US

**New Mailing Address:**

FEI Number: 26-2822591

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SINGH, JAPINDER  
5379 RIVERROCK RD  
LAKELAND, FL 33809 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: SINGH, JAPINDER  
Address: 5379 RIVERROCK RD  
City-St-Zip: LAKELAND, FL 33809 US

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: JAPINDER SINGH

MGRM

04/28/2011

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