

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000063889

FILED
Feb 07, 2011
Secretary of State

Entity Name: SARASOTA PAIN MEDICINE RESEARCH, LLC

Current Principal Place of Business:

5880 RAND BLVD, STE 215
SARASOTA, FL 34238

New Principal Place of Business:

Current Mailing Address:

5880 RAND BLVD, STE 215
SARASOTA, FL 34238

New Mailing Address:

FEI Number: 26-2881138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ERB, DONALD
5880 RAND BLVD, STE 215
SARASOTA, FL 34238 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: ERB, DONALD
Address: 5880 RAND BLVD., SUITE 215
City-St-Zip: SARASOTA, FL 34238

Title: MGRM
Name: MIGUEL, RAFAEL
Address: 5880 RAND BLVD., SUITE 215
City-St-Zip: SARASOTA, FL 34238

Title: MGRM
Name: DYCHES, PATRICIA
Address: 5880 RAND BLVD., SUITE 215
City-St-Zip: SARASOTA, FL 34238

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: PATRICIA DYCHES

MGRM

02/07/2011

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