

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000067609

Entity Name: MEDISERV INFUSION, LLC

FILED
May 04, 2009
Secretary of State

Current Principal Place of Business:

1281 SOUTH TAMIAMI TRAIL
SARASOTA, FL 34239

New Principal Place of Business:

5732 CLARK ROAD
SARASOTA, FL 34233

Current Mailing Address:

1281 SOUTH TAMIAMI TRAIL
SARASOTA, FL 34239

New Mailing Address:

5732 CLARK ROAD
SARASOTA, FL 34233

FEI Number: 26-2977297 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WAGNER, E. JOHN II
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: DAVIDSON, ROBERT P
Address: 1586 EAST BROOKE DR.
City-St-Zip: SARASOTA, FL 34231

Title: MGRM () Change (X) Addition
Name: DAVIDSON, RICHARD A
Address: 1222 POINT CRISP ROAD
City-St-Zip: SARASOTA, FL 34242

Title: MGRM () Change (X) Addition
Name: HOLLINGSWORTH, CRAIG H
Address: 7610 COVE TERRACE
City-St-Zip: SARASOTA, FL 34231

Title: MGRM () Change (X) Addition
Name: KUTZKO, JOHN D
Address: 109 LOUELLA LANE
City-St-Zip: NOKOMIS, FL 34275

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JOHN KUTZKO

MNGR

05/04/2009

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