2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# L08000070216

Entity Name: GUTHRIE MEDICAL CONSULTING, LLC

Current Principal Place of Business:

4607 CHEVAL BLVD.
LUTZ, FL 33558

New Principal Place of Business:

Current Mailing Address:

4607 CHEVAL BLVD.
LUTZ, FL 33558

New Mailing Address:

FEI Number: 26-3349014 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RINEER, GAIL
4607 CHEVAL BLVD.
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

RINEER, GAIL G
4607 CHEVAL BLVD.
LUTZ, FL 33558 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: GAIL G RINEER 04/22/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: RINEER, GAIL
Address: 4607 CHEVAL BLVD.
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: RINEER, GAIL G
Address: 4607 CHEVAL BLVD.
City-St-Zip: LUTZ, FL 33558

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: GAIL G RINEER MGMR 04/22/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date