

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000075012

FILED
Apr 22, 2010
Secretary of State

Entity Name: LAKE NONA MEDICAL, LLC

Current Principal Place of Business:

9801 LAKE NONA ROAD
ORLANDO, FL 32827

New Principal Place of Business:

Current Mailing Address:

9801 LAKE NONA ROAD
ORLANDO, FL 32827

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

B&C CORPORATE SERVICES OF CENTRAL FL, INC
390 NORTH ORANGE AVENUE, SUITE 1400
ORLANDO, FL 32801 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: P
Name: ZBORIL, JAMES L
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP
Name: ADAMS, ROBERT B
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP
Name: SEYMOUR, THADDEUS JR.
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP
Name: LEVEY, RICHARD L
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP
Name: PEEK, SCOTT I JR.
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP
Name: THAKKAR, RASESH
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

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: JAMES L. ZBORIL

P

04/22/2010

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