

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000090829

Entity Name: CFUS HOLDINGS, LLC

FILED
Apr 28, 2010
Secretary of State

Current Principal Place of Business:

1901 SE 18TH AVE., BLDG. 300
OCALA, FL 34472

New Principal Place of Business:

12901 COUNTY ROAD 103
OXFORD, FL 34484 US

Current Mailing Address:

1901 SE 18TH AVE., BLDG. 300
OCALA, FL 34472

New Mailing Address:

12901 COUNTY ROAD 103
OXFORD, FL 34484 US

FEI Number: 61-1584761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVEY C. TAUB, M.D.
1901 SE 18TH AVE., BLDG. 300
OCALA, FL 34472 US

Name and Address of New Registered Agent:

TAUB, HARVEY C
1901 SE 18TH AVE., BLDG. 300
OCALA, FL 34471 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: HARVEY C. TAUB

04/28/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MICHAEL, DESAUTEL G
Address: 609 WEST HIGHLANDS BLVD.
City-St-Zip: INVERNESS,, FL 34452

Title: MGRM
Name: RAO, DINESH S
Address: 1901 SE 18TH AVE., BLDG 300
City-St-Zip: Ocala, FL 34471

Title: MGRM
Name: TAUB, HARVEY C
Address: 1901 SE 19TH AVE., BLDG 300
City-St-Zip: Ocala, FL 34471

Title: MGR
Name: SHER, ANDREW B
Address: 616 NORTH PALMETTO STREET
City-St-Zip: LEESBURG,, FL 34748 US

Title: MGR
Name: JO, PAUL D
Address: 2301 SE 3RD AVE.
City-St-Zip: Ocala,, FL 34471 US

Title: MGRM
Name: DESAI, PARESH
Address: 609 WEST HIGHLAND BLVD.
City-St-Zip: INVERNESS, FL 34452 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: HARVEY C. TAUB

MGRM

04/28/2010

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