

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000097393

Entity Name: JSP MEDICAL LLC

FILED  
May 01, 2011  
Secretary of State

## Current Principal Place of Business:

3443 SW 24TH STREET  
303  
GAINESVILLE, FL 32608 US

## New Principal Place of Business:

4105 SW 19TH DRIVE  
GAINESVILLE, FL 32608 US

## Current Mailing Address:

3443 SW 24TH STREET  
303  
GAINESVILLE, FL 32608 US

## New Mailing Address:

4105 SW 19TH DRIVE  
GAINESVILLE, FL 32608 US

FEI Number: 26-4784842

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MYERS, STEPHEN M  
3443 SW 24TH STREET  
303  
GAINESVILLE, FL FL US

## Name and Address of New Registered Agent:

MYERS, STEPHEN M  
4105 SW 19TH DRIVE  
GAINESVILLE, FL FL 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:

05/01/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: MYERS, STEPHEN M  
Address: 4105 SW 19TH DRIVE  
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGRM  
Name: WINTERS, JASON T  
Address: 2134 SW 14TH STREET  
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGRM  
Name: CARNEY, PAUL R  
Address: 5325 NW 80TH AVE  
City-St-Zip: GAINESVILLE, FL 32653 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: STEPHEN MYERS

MGR

05/01/2011

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