

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000105039

**FILED**  
**Feb 24, 2012**  
**Secretary of State**

**Entity Name:** PREMIER LEGAL NURSE CONSULTANTS, LLC

**Current Principal Place of Business:**

5722 S FLAMINGO RD.  
206  
COOPER CITY, FL 33330

**New Principal Place of Business:**

10738 GARDEN RIDGE CT.  
DAVIE, FL 33328

**Current Mailing Address:**

10738 GARDEN RIDGE CT.  
DAVIE, FL 33328

**New Mailing Address:**

**FEI Number:** 26-4187817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARTINEZ, THERESA M  
5722 S FLAMINGO RD.  
206  
COOPER CITY, FL 33330 US

**Name and Address of New Registered Agent:**

MARTINEZ, THERESA M  
10738 GARDEN RIDGE CT.  
DAVIE, FL 33328 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: THERESA M. MARTINEZ

02/24/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MARTINEZ, THERESA M  
Address: 10738 GARDEN RIDGE CT.  
City-St-Zip: DAVIE, FL 33328

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: THERESA M. MARTINEZ

MGRM

02/24/2012

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