2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2009
Secretary of State

DOCUMENT# L08000106348

Entity Name: AVANTIMED LLC

Current Principal Place of Business:

8685 SE 19TH AVE.RD.
OCALA, FL 34480

New Principal Place of Business:

8685 SE 19TH AVE. RD.
OCALA, FL 34480

Current Mailing Address:

8685 SE 19TH AVE.RD.
OCALA, FL 34480

New Mailing Address:

8685 SE 19TH AVE. RD.
OCALA, FL 34480

FEI Number: 26-3731462 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROTHSCHILD, RONALD S
8685 SE 19TH. AVE.RD.
OCALA, FL 34480 US

Name and Address of New Registered Agent:

ROTHSCHILD, RONALD S
8685 SE 19TH. AVE. RD.
OCALA, FL 34480 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: RONALD S. ROTHSCHILD 04/19/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ROTHSCHILD, RONALD S
Address: 8685 SE 19TH AVE.RD.
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ROTHSCHILD, RONALD S
Address: 8685 SE 19TH AVE. RD.
City-St-Zip: OCALA, FL 34480

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: RONALD S. ROTHSCHILD MGRM 04/19/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date