2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 24, 2010
Secretary of State

DOCUMENT# L09000004940

Entity Name: SPINAL DECOMPRESSION OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

2632 INDIANTOWN ROAD
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

2632 INDIANTOWN ROAD
JUPITER, FL 33458 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

PAPA, MICHAEL
2632 INDIANTOWN ROAD
JUPITER, FL FL 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: MGRM
Name: MICHAEL PAPA DC PA
Address: 2632 INDIANTOWN ROAD
City-St-Zip: JUPITER, FL 33458 US

Title: MGRM
Name: FENN, RICHARD
Address: 2632 INDIANTOWN ROAD
City-St-Zip: JUPITER, FL 33458 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 Statues.

SIGNATURE: MICHAEL PAPA MGRM 02/24/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date