2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 02, 2012
Secretary of State

DOCUMENT# L09000030488

Entity Name: MID-FLORIDA PAIN MANAGEMENT, L.L.C.

Current Principal Place of Business:

1805 SE 16TH AVE
SUITE 202
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

3220 S.W. 80TH AVENUE
OCALA, FL 34481

New Mailing Address:

FEI Number: 26-4790487 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TURNER, MANUEL E
3220 SW 80TH AVE
OCALA, FL 34481 US

Name and Address of New Registered Agent:

TURNER, MANUEL E JR
3220 SW 80TH AVE
OCALA, FL 34481 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: MANUEL E TURNER JR 03/02/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: TURNER, MANUEL E JR
Address: 3220 S.W. 80TH AVENUE
City-St-Zip: OCALA, FL 34481

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: MANUEL E TURNER JR MGRM 03/02/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date