2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 20, 2012
Secretary of State

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Entity Name: AMERICAN SLEEP MEDICINE, LLC

Current Principal Place of Business:

7900 BELFORT PKWY
STE 301
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7900 BELFORT PKWY
STE 301
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 26-4730494 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KING, ANDREW
7900 BELFORT PKWY
STE 301
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

MARTIN, THOMAS
7900 BELFORT PKWY
STE 301
JACKSONVILLE, FL 32256 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: THOMAS MARTIN 01/20/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: CFO
Name: RICHIE, CHRISTINE M
Address: 7900 BELFORT PARKWAY, SUITE 301
City-St-Zip: JACKSONVILLE, FL 32256

Title: PRES
Name: MARTIN, THOMAS
Address: 7900 BELFORT PARKWAY, SUITE 301
City-St-Zip: JACKSONVILLE, FL 32256

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: CHRISTINE RICHIE CFO 01/20/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date