2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2011
Secretary of State

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Entity Name: 1ST AMERICAN FAMILY MEDICAL ASSOCIATES, LLC

Current Principal Place of Business:

120 MEDICAL BLVD., SUITE 103
SPRING HILL, FL 34609

New Principal Place of Business:

Current Mailing Address:

120 MEDICAL BLVD., SUITE 103
SPRING HILL, FL 34609

New Mailing Address:

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

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: GROVE, JEFFREY S D.O.
Address: 12020 SEMINOLE BLVD.
City-St-Zip: LARGO, FL 33778

Title: MGRM
Name: BLACKBURN, ROBERT G
Address: 10494 NORTHCLIFFE BLVD.
City-St-Zip: SPRING HILL, FL 34608

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: JEFFREY S. GROVE, D.O. MGR 04/25/2011

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