

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000044745

FILED
Apr 26, 2010
Secretary of State

Entity Name: THE MIKEY CENTER FOR HYPERBARIC OXYGEN, LLC

Current Principal Place of Business:

7349 PROFESSIONAL PARKWAY EAST
SARASOTA, FL 34240

New Principal Place of Business:

7349 PROFESSIONAL PARKWAY
SARASOTA, FL 34240

Current Mailing Address:

P.O. BOX 717
NOKOMIS, 34274

New Mailing Address:

7349 PROFESSIONAL PARKWAY
SARASOTA, FL 34240

FEI Number: 27-0187205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, M D
7349 PROFESSIONAL PARKWAY EAST
SARASOTA, FL 34240 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: STEVENS, M D
Address: P O BOX 717
City-St-Zip: NOKOMIS, FL 34274

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 Statutes.

SIGNATURE: M.D. STEVENS

MGR

04/26/2010

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