

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 28, 2010
Secretary of State

Entity Name: HOPE PAIN MANAGEMENT GROUP, LLC

Current Principal Place of Business:

5410 10TH AVE SOUTH
GULFPORT, FL 33707

New Principal Place of Business:

1250 MARINER BLVD.
SPRING HILL, FL 34609

Current Mailing Address:

5410 10TH AVE SOUTH
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 27-0217594 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BERGMAN, CLAUDETTE L
146 BRYAN CAVE RD
SOUTH DAYTONA, FL 32119 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: MGR
Name: ZIMNIK, JOHN L
Address: 5410 10TH AVE SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: MGR
Name: HUTCHINSON, LYNN R
Address: 3256 GULFWINDS CIRCLE
City-St-Zip: HERNANDO, FL 34607

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: JOHN ZIMNIK

MGR

04/28/2010

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