

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000052754

FILED
Apr 29, 2011
Secretary of State

Entity Name: PATIENT ADVOCATES, LLC

Current Principal Place of Business:

1851 50TH AVENUE NORTH
ST. PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

PO BOX 76262
ST. PETERSBURG, FL 337346262

New Mailing Address:

FEI Number: 27-0319192

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUYKENDALL, AMY E ESQUIRE
1851 50TH AVENUE NORTH
ST. PETERSBURG, FL 33714 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: CUYKENDALL, AMY E
Address: PO BOX 76262
City-St-Zip: ST. PETERSBURG, FL 337346262

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: AMY E. CUYKENDALL

MGRM

04/29/2011

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