2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 07, 2010
Secretary of State

DOCUMENT# L09000069719

Entity Name: CENTRAL FLORIDA MEDICAL CONCEPTS, LLC

Current Principal Place of Business:

3702 MOON DANCER PLACE
ST CLOUD, FL 34772

New Principal Place of Business:

Current Mailing Address:

3702 MOON DANCER PLACE
ST CLOUD, FL 34772

New Mailing Address:

FEI Number: 27-0527675 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SMITH, CHRISTINA L
3702 MOON DANCER PLACE
ST CLOUD, FL 34772 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: SMITH, CHRISTINA L
Address: 3702 MOON DANCER PLACE
City-St-Zip: ST CLOUD, FL 34772

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: CHRISTINA L. SMITH MGR 03/07/2010

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