

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jun 16, 2010
Secretary of State

Entity Name: NAOMI'S MEDICAL ESCORT SERVICES,LLC

Current Principal Place of Business:

570 N W HAVEN ST
PORT ST LUCIE, FL 34983 US

New Principal Place of Business:

Current Mailing Address:

570 N W HAVEN ST
PORT ST LUCIE, FL 34983 US

New Mailing Address:

7548 S. US 1
STE 129
PORT ST LUCIE, FL 34952 US

FEI Number: 94-3486127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, REGINA C
570 N W HAVEN ST
PORT ST LUCIE,, FL 34983 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: THOMPSON, REGINA C
Address: 570 N.W. HAVEN ST
City-St-Zip: PORT ST LUCIE,, FL 34983 US

Title: MGR
Name: THOMPSON, VICTORIA E
Address: 570 N W HAVEN ST
City-St-Zip: PORT ST LUCIE, FL 334983 US

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: REGINA THOMPSON

MGR

06/16/2010

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