

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000070756

FILED
Mar 16, 2010
Secretary of State

Entity Name: FLORIDA PATIENT ADVOCATES, LLC

Current Principal Place of Business:

302 SMOKERISE BLVD
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

302 SMOKERISE BLVD
LONGWOOD, FL 32779

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABELOW, ROXANE A
108 BAY HAMMOCK LANE
LONGWOOD, FL 32779 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: ABELOW, ROXANE A
Address: 108 BAY HAMMOCK LANE
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM
Name: KURLAND, SHERYL P
Address: 302 SMOKERISE BLVD
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM
Name: MISEK, TERRI S
Address: 115 WEST YORK CT
City-St-Zip: LONGWOOD, FL 32779

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: ROXANE A ABELOW

MGRM

03/16/2010

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