

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000084374

Entity Name: C & C NEURODIAGNOSTICS, LLC

FILED
Mar 29, 2010
Secretary of State

Current Principal Place of Business:

728 DEWDROP LOOP
SAINT JOHNS, FL 32259

New Principal Place of Business:

Current Mailing Address:

728 DEWDROP LOOP
SAINT JOHNS, FL 32259

New Mailing Address:

2750 RACE TRACK ROAD, #305
PMB 156
SAINT JOHNS, FL 32259

FEI Number: 27-0843617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FISHER, CAROLYN
11436 SQUIRE WAY LANE
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

FISHER, CAROLYN OWNER
11436 SQUIRE WAY LANE
JACKSONVILLE, FL 32223 US

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: CAROLYN FISHER

03/29/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P
Name: FISHER, CAROLYN
Address: 11436 SQUIRE WAY LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP
Name: FISHER, CHRIS
Address: 728 DEWDROP LOOP
City-St-Zip: SAINT JOHNS, FL 32259

Title: MGR
Name: FISHER, YVONNE
Address: 728 DEWDROP LOOP
City-St-Zip: SAINT JOHNS, FL 32259

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: YVONNE FISHER

MGR

03/29/2010

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