

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000095256

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** MD INFORMATION TECHNOLOGY PROVIDER, LLC

**Current Principal Place of Business:**

4849 LAKE WORTH RD  
GREENACRES, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

4849 LAKE WORTH RD  
GREENACRES, FL 33463

**New Mailing Address:**

**FEI Number:** 27-1049596

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

ABELLARD, DAVID  
4849 LAKE WORTH ROAD  
GREENACRES, FL 33463 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: DAVID ABELLARD

02/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ABELLARD, DAVID  
Address: 4849 LAKE WORTH RD  
City-St-Zip: GREENACRES, FL 33463

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: DAVID ABELLARD

P

02/28/2011

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