2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2012
Secretary of State

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Entity Name: MID FLORIDA MEDICAL & CHIROPRACTIC CENTER LLC

Current Principal Place of Business:

100 PARK PLACE BLVD,
SUITE 201
KISSIMMEE, FL 34741 US

New Principal Place of Business:

Current Mailing Address:

100 PARK PLACE BLVD
SUITE 201
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 27-1106247 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUNDERLAND, DEREK
922 CROTON RD
CELEBRATION, FL 34747 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: GALLO, RACHAEL
Address: 1354 WILLOW BRANCH ROAD
City-St-Zip: ORLANDO, FL 32828

Title: MGR
Name: SUNDERLAND, DEREK
Address: 922 CROTON RD
City-St-Zip: CELEBRATION, FL 34747 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 Statues.

SIGNATURE: DEREK SUNDERLAND MGR 01/23/2012

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