2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000106333

Entity Name: FLORIDA INNOVATION PARTNERS, LLC

FILED Jan 05, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11350 S.W. VILLAGE PARKWAY, 3RD FLOOR 9801 SW DISCOVERY WAY PORT ST. LUCIE, FL 34987 PORT ST. LUCIE, FL 34987

Current Mailing Address: New Mailing Address:

11350 S.W. VILLAGE PARKWAY, 3RD FLOOR 9801 SW DISCOVERY WAY PORT ST. LUCIE, FL 34987 PORT ST. LUCIE, FL 34987

FEI Number: 27-1459905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILLIAMS, MARK B P
11350 SW VILLAGE PARKWAY
PORT SAINT LUCIE
FL, FL 34987 US

WILLIAMS, MARK B P
9801 SW DISCOVERY WAY
PORT SAINT LUCIE
FL, FL 34987 US

FL, FL 34987 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: 01/05/2012

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MR.

 Name:
 WILLIAMS, MARK P

 Address:
 9801 SW DISCOVERY WAY

 City-St-Zip:
 PORT SAINT LUCIE, FL 34987

Title: MR.

Name: NELSON, JAY VP

Address: 9801 SW DISCOVERY WAY
City-St-Zip: PORT SAINT LUCIE, FL 34987

Title: MRS.

 Name:
 VISCONTE, DANIELLE S

 Address:
 9801 SW DISCOVERY WAY

 City-St-Zip:
 PORT SAINT LUCIE, FL 34987

Title: MR.

Name: MITCHELL, THOMAS CFO
Address: 9801 SW DISCOVERY WAY
City-St-Zip: PORT SAINT LUCIE, FL 34987

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: THOMAS MITCHELL CFO 01/05/2012