

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000115192

FILED
Apr 26, 2010
Secretary of State

Entity Name: EMERGENCY MEDICINE INFORMATICS ASSOCIATES, LLC

Current Principal Place of Business:

2950 N. BEACH ROAD, APT. B 421
ENGLEWOOD, FL 34223

New Principal Place of Business:

2950 N. BEACH ROAD
APT #B421
ENGLEWOOD, FL 34223

Current Mailing Address:

2950 N. BEACH ROAD, APT. B 421
ENGLEWOOD, FL 34223

New Mailing Address:

2950 N. BEACH ROAD
APT #B421
ENGLEWOOD, FL 34223

FEI Number: 27-1717531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, JOHN L
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34230 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: NIN, IRMA E
Address: 2950 N BEACH ROAD, APT #B421
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM
Name: KLINE, CYNTHIA
Address: 45 OVERLOOK DRIVE
City-St-Zip: DANVILLE, PA 17821

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: IRMA E NIN

MGRM

04/26/2010

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