

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000120479

FILED
Feb 08, 2011
Secretary of State

Entity Name: FLORIDA IMMEDIATE CARE CENTERS , LLC

Current Principal Place of Business:

275 WEST MAIN STREET
LAKE BUTLER, FL 32054 US

New Principal Place of Business:

128 NW 137TH DRIVE
NEWBERRY, FL 32669 US

Current Mailing Address:

P.O. BOX 567
LAKE BUTLER, FL 32054 US

New Mailing Address:

128 NW 137TH DRIVE
NEWBERRY, FL 32669 US

FEI Number: 27-1542840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORTNER, CHRISTOPHER
275 WEST MAIN STREET
LAKE BUTLER, FL 32054 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: FORTNER, CHRISTOPHER
Address: 275 WEST MAIN STREET
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: PRES
Name: CARLTON, PAUL F II
Address: 128 NW 137TH DRIVE
City-St-Zip: NEWBERRY, FL 32669

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: PAUL CARLTON

PRES

02/08/2011

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