

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000036410

Entity Name: JSF MEDICAL LLC

FILED
Feb 07, 2012
Secretary of State

Current Principal Place of Business:

7670 BROKEN ARROW TRAIL
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

7670 BROKEN ARROW TRAIL
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 27-4712847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLER, DAVID S
7670 BROKEN ARROW TRL
WINTER PARK, FL 32792 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: FULLER, DAVID S
Address: 7670 BROKEN ARROW TRAIL
City-St-Zip: WINTER PARK, FL 32792

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 S FULLER

MGRM

02/07/2012

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