2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000059021

FILED
Apr 28, 2011
Secretary of State

Entity Name: MISSION HEALTHCARE SOLUTIONS, LLC

Current Principal Place of Business:

7195 MURRELL RD., STE 101
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

7195 MURRELL RD., STE 101
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 27-2835789 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRAIG, CAROL
7001 N. ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920 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: CRAIG, CAROL
Address: 7195 MURRELL RD., STE 101
City-St-Zip: MELBOURNE, FL 32940

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: CAROL CRAIG MGRM 04/28/2011

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