

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000074193

Entity Name: FRYE MEDICAL GROUP, PLLC

**FILED**  
**Aug 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

61 PINEHILL TRAIL WEST  
TEQUESTA, FL 33469 US

**New Principal Place of Business:**

3900 MILITARY TRAIL  
SUITE 600  
JUPITER, FL 33458 US

**Current Mailing Address:**

61 PINEHILL TRAIL WEST  
TEQUESTA, FL 33469 US

**New Mailing Address:**

23 ST. THOMAS DRIVE  
PALM BEACH GARDENS, FL 33418 US

FEI Number: 27-2955220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRYE, DARRIN L  
61 PINEHILL TRAIL WEST  
TEQUESTA, FL 33469 US

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

FRYE, DARRIN L  
23 ST. THOMAS DRIVE  
JUPITER, FL 33418 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:

08/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FRYE, DARRIN L MD  
Address: 23 ST. THOMAS DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: DARRIN L. FRYE, MD

PRES

08/28/2012

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