

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000076246

Entity Name: HUNTER BIOTICS, LLC

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

**Current Principal Place of Business:**

1860 SE PORT ST LUCIE BLVD.  
PORT ST LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8563  
PORT ST LUCIE, FL 34985 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

HUNTER, RAY F  
1860 SE PORT ST LUCIE BLVD.  
PORT ST LUCIE, FL 34952 US

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

HUNTER, RAY F SC.D.  
1860 SE PORT ST LUCIE BLVD.  
PORT ST LUCIE, FL 34952 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: RAY F HUNTER

04/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HUNTER, ROBERTA S M.D.  
Address: 1860 SE PORT ST LUCIE BLVD.  
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: MGRM  
Name: HUNTER, RAY F SC.D.  
Address: P.O. BOX 8563  
City-St-Zip: PORT ST LUCIE, FL 34985 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: RAY F HUNTER

MGRM

04/28/2012

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