

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000076348

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** SPINE DESIGN ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

11313 MANDARIN RIDGE LANE  
JACKSONVILLE, FL 32258

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1693  
BOUNTIFUL, UT 840111693

**New Mailing Address:**

**FEI Number:** 20-8542143

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NAIF, BARBARA  
11313 MANDARIN RIDGE LANE  
JACKSONVILLE, FL 32258 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:** MGR  
**Name:** BERRY, BRET MICHAEL  
**Address:** 514 FRANK SHAW ROAD  
**City-St-Zip:** TALLAHASSEE, FL 32312

**Title:** MGR  
**Name:** ZIDEK, MARK C  
**Address:** 7117 SOUTH 400 WEST  
**City-St-Zip:** MIDVALE, UT 84047

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:** BRET M. BERRY

MGR

01/12/2011

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