

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000077035

FILED
Feb 11, 2011
Secretary of State

Entity Name: PODIATRY CENTERS OF NORTH FLORIDA,, LLC

Current Principal Place of Business:

2236 PARK ST
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

2236 PARK ST
JACKSONVILLE, FL 32204

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROSHELL, HOWARD J DPM
2236 PARK ST
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

REZNICSEK FRASER HASTINGS WHITE & SHAFFER
4230 PABLO PROFESSIONAL COURT
SUITE 200
JACKSONVILLE, FL 32224 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: RICK M. REZNICSEK

02/11/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: GROSHELL, HOWARD J DPM
Address: 2236 PARK ST
City-St-Zip: JACKSONVILLE, FL 32204

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: HOWARD J. GROSHELL, DPM

MGR

02/11/2011

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