

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000080381

FILED  
Mar 20, 2012  
Secretary of State

Entity Name: SEMINOLE INJURY GROUP, LLC

**Current Principal Place of Business:**

3240 W. LAKE MARY BLVD.  
STE. 1300  
LAKE MARY, FL 32746 US

**New Principal Place of Business:**

**Current Mailing Address:**

3240 W. LAKE MARY BLVD.  
STE. 1300  
LAKE MARY, FL 32746 US

**New Mailing Address:**

FEI Number: 27-3253985

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOMA, PAUL M  
3240 W. LAKE MARY BLVD.  
STE. 1300  
LAKE MARY, FL 32746 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: TOMA, PAUL M  
Address: 3240 W. LAKE MARY BLVD., STE. 1300  
City-St-Zip: LAKE MARY, FL 32746 US

Title: MGRM  
Name: LOPERFITO, DAMION S  
Address: 609 MAITLAND AVE, #4  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: MGRM  
Name: RESSLER, MARTIN  
Address: 870 CLARK STREET, SUITE 1040  
City-St-Zip: OVIEDO, FL 32765 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: PAUL TOMA

MGRM

03/20/2012

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