2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 30, 2011
Secretary of State

DOCUMENT# L10000090746

Entity Name: ICON MEDICAL CENTERS, LLC

Current Principal Place of Business:

426 SW 8TH STREET, STE. 2
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

6505 NW 81ST BLVD.
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 27-3350226 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUCAS, DR. EDWARD
426 SW 8TH STREET, STE. 2
MIAMI, FL 33130 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: LUCAS, DR. EDWARD
Address: 426 SW 8TH STREET, STE. 2
City-St-Zip: MIAMI, FL 33130

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 Statues.

SIGNATURE: DR. EDWARD LUCAS MGR 08/30/2011

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