2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
May 18, 2012
Secretary of State

DOCUMENT# L10000092212

Entity Name: LAKELAND MIDWIFERY CARE LLC

Current Principal Place of Business:

203 DORIS DRIVE
LAKELAND, FL 33813

New Principal Place of Business:

201 NORTH KENTUCKY AVENUE
#1
LAKELAND, FL 33801

Current Mailing Address:

205 E HIBISCUS DRIVE
LAKELAND, FL 33803

New Mailing Address:

FEI Number: 27-3372790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

POWER, MARIANNE
205 E HIBISCUS DRIVE
LAKELAND, FL 33803 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: POWER, MARIANNE
Address: 205 E HIBISCUS DRIVE
City-St-Zip: LAKELAND, FL 33803

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: MARIANNE POWER MGR 05/18/2012

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