

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000093108

FILED
May 01, 2011
Secretary of State

Entity Name: SEYMOUR SPINE & REHABILITATION, LLC

Current Principal Place of Business:

4800 4TH STREET NORTH
ST. PETERSBURG, FL 33703

New Principal Place of Business:

400 EAST COUNTRY CLUB CIRCLE
PLANTATION, FL 33317

Current Mailing Address:

P.O. BOX 17972
CLEARWATER, FL 33762

New Mailing Address:

P.O. BOX 16576
FT. LAUDERDALE, FL 33318

FEI Number: 27-1959548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SEYMOUR, AMIR R MD
14330 58TH STREET NORTH
4301
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

SEYMOUR, AMIR R MD
400 EAST COUNTRY CLUB CIRCLE
PLANTATION, FL 33317 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:

05/01/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SEYMOUR, ANDREA R MD
Address: 400 E COUNTRY CLUB CIRCLE
City-St-Zip: PLANTATION, FL 33317 US

Title: MGRM
Name: SEYMOUR, AMIR R MD
Address: 400 E COUNTRY CLUB CIRCLE
City-St-Zip: PLANTATION, FL 33317 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: AMIR SEYMOUR

MGRM

05/01/2011

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