

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000118129

FILED
Apr 26, 2011
Secretary of State

Entity Name: STATESERV MEDICAL OF FLORIDA, LLC

Current Principal Place of Business:

2130 E UNIVERSITY DRIVE
TEMPE, AZ 85281

New Principal Place of Business:

1325 NW 98TH COURT
9
DORAL, FL 33172

Current Mailing Address:

2130 E UNIVERSITY DRIVE
TEMPE, AZ 85281

New Mailing Address:

FEI Number: 27-3959693 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PERRE, ANTHONY R
Address: 4275 E CAROLINE LANE
City-St-Zip: GILBERT, AZ 85296

Title: MGRM
Name: PAXSON, CHARLES M
Address: 4324 E CAROLINE LANE
City-St-Zip: GILBERT, AZ 85296

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: ANTHONY R. PERRE

MGRM

04/26/2011

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