

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000010065

FILED
Apr 27, 2012
Secretary of State

Entity Name: COPLAN THERAPEUTIC MINISTRIES,LLC

Current Principal Place of Business:

1508 W LARUA ST
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

1508 W LARUA ST
PENSACOLA, FL 32501

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWANAGAN, LONNIE J LCSW
111 GARFIELD DR
PENSACOLA, FL 32505 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: SWANAGAN, LONNIE J LCSW
Address: 1508 W LARUA ST
City-St-Zip: PENSACOLA, FL 32501 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: LONNIE SWANAGAN J LCSW

MGR

04/27/2012

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