

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000057643

FILED
Jan 13, 2012
Secretary of State

Entity Name: FLORIDA MEDICAL PRODUCTS AND SERVICES, LLC

Current Principal Place of Business:

3295 WINDY WOOD DRIVE
ORLANDO, FL 32812

New Principal Place of Business:

Current Mailing Address:

3295 WINDY WOOD DRIVE
ORLANDO, FL 32812

New Mailing Address:

FEI Number: 90-0717715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AIMEE COLLINS HITCHNER, ESQUIRE
1847 PALM LANE
ORLANDO, FL 32803 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: COLLINS, CHARLES
Address: 3295 WINDY WOOD DRIVE
City-St-Zip: ORLANDO, FL 32812

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: CHARLES J. COLLINS

MGR

01/13/2012

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