

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000077779

FILED
Apr 16, 2012
Secretary of State

Entity Name: HAWKINS FAMILY MEDICINE LLC

Current Principal Place of Business:

101 E WISCONSIN AVE
BONIFAY, FL 32425

New Principal Place of Business:

2997 RICHARDS LN
BONIFAY, FL 32425

Current Mailing Address:

101 E WISCONSIN AVE
BONIFAY, FL 32425

New Mailing Address:

2997 RICHARDS LN
BONIFAY, FL 32425

FEI Number: 45-2720879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAWKINS, PATRICK L MD
101 E WISCONSIN AVE
BONIFAY, FL 32425 US

Name and Address of New Registered Agent:

HAWKINS, PATRICK L MD
2997 RICHARDS LN
BONIFAY, FL 32425 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:

04/16/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: HAWKINS, PATRICK L MD
Address: 2997 RICHARDS LN
City-St-Zip: BONIFAY, FL 32425

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: PATRICK HAWKINS

MGR

04/16/2012

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