2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2012
Secretary of State

DOCUMENT# L11000082419

Entity Name: FORDE GROUP HEALTHCARE, LLC

Current Principal Place of Business:

19046 BRUCE B DOWNS BLVD.
TAMPA, FL 336473387

New Principal Place of Business:

Current Mailing Address:

19046 BRUCE B DOWNS BLVD.
TAMPA, FL 336473387

New Mailing Address:

FEI Number: 45-2766684 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FORDE, COLIN A
8359 DUNHAM STATION DRIVE
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

FORDE, COLIN A SR.
8359 DUNHAM STATION DRIVE
TAMPA, FL 33647 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: COLIN A. FORDE 04/28/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: FORDE, COLIN A SR
Address: 19046 BRUCE B DOWNS BLVD.
City-St-Zip: TAMPA, FL 336473387

Title: MGRM
Name: FORDE, GARETH K SR.
Address: 19046 BRUCE B DOWNS BLVD.
City-St-Zip: TAMPA, FL 336473387

Title: MGRM
Name: WELLS, JABALI K
Address: 19046 BRUCE B DOWNS BLVD.
City-St-Zip: TAMPA, FL 336473387

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 Statues.

SIGNATURE: COLIN A. FORDE MGRM 04/28/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date