

2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000088713

FILED
Apr 30, 2012
Secretary of State

Entity Name: VALLEY MEDICAL PRODUCTS, LLC

Current Principal Place of Business:

9995 GATE PARKWAY N
SUITE 330
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

9995 GATE PARKWAY N
SUITE 330
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 45-2989585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAWKEYE, INC.
9995 GATE PARKWAY N.
SUITE 330
JACKSONVILLE, FL 32246 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: CAHOON, ARTHUR L
Address: 9995 GATE PARKWAY N. SUITE 330
City-St-Zip: JACKSONVILLE, FL 32246

Title: P, C
Name: DEBIASE, JOHN
Address: 572 PONTE VEDRA BLVD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: ARTHUR L. CAHOON

MGR

04/30/2012

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