

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000112280

Entity Name: MOBILE MEDICAL ED., LLC

FILED
Mar 31, 2012
Secretary of State

Current Principal Place of Business:

1530 WEST CLEVELAND STREET
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

1530 WEST CLEVELAND STREET
TAMPA, FL 33606

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:

LEWIS, MICHAEL
1530 WEST CLEVELAND STREET
TAMPA, FL 33606 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: ALEXANDER, LINDA
Address: 1530 WEST CLEVELAND STREET
City-St-Zip: TAMPA, FL 33606

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: MICHAEL E. LEWIS

RA

03/31/2012

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