

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000121966

FILED
Mar 27, 2012
Secretary of State

Entity Name: PROFESSIONAL CLINICAL SERVICES OF WI #1 LLC

Current Principal Place of Business:

292 OLD DIXIE HIGHWAY
VERO BEACH, FL 32962 US

New Principal Place of Business:

Current Mailing Address:

292 OLD DIXIE HIGHWAY
VERO BEACH, FL 32962 US

New Mailing Address:

FEI Number: 35-2427242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE SOMMERFELD GROUP & ASSOCIATES INC
292 OLD DIXIE HWY
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

EXPERICS LLC
292 OLD DIXIE HWY
VERO BEACH, FL 32962 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: DAVID SOMMERFELD

03/27/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: EXPERICS LLC
Address: 292 OLD DIXIE HWY
City-St-Zip: VERO BEACH, FL 32962 US

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: EXPERICS LLC

MGRM

03/27/2012

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