

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000122014

FILED
Apr 26, 2012
Secretary of State

Entity Name: ADVANCED LYMPHEDEMA CARE, LLC

Current Principal Place of Business:

2074 OCEAN RIDGE CIRCLE
VERO BEACH, FL 32963

New Principal Place of Business:

Current Mailing Address:

2074 OCEAN RIDGE CIRCLE
VERO BEACH, FL 32963

New Mailing Address:

FEI Number: 90-0772243 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ENGEL, JANET
2074 OCEAN RIDGE CIRCLE
VERO BEACH, FL 32963 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: ENGEL, VICTOR C
Address: 2074 OCEAN RIDGE CIRCLE
City-St-Zip: VERO BEACH, FL 32963

Title: MGRM
Name: ENGEL, JANET
Address: 2074 OCEAN RIDGE CIRCLE
City-St-Zip: VERO BEACH, FL 32963

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: VICTOR ENGEL

MGR

04/26/2012

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