

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000006802

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** MONTECITO MEDICAL INVESTMENT COMPANY, LLC

**Current Principal Place of Business:**

1307 W. 6TH STREET, SUITE 214  
CORONA, CA 92882

**New Principal Place of Business:**

**Current Mailing Address:**

1307 W. 6TH STREET, SUITE 214  
CORONA, CA 92882

**New Mailing Address:**

**FEI Number:** 20-5814214

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROGERS, WILLIAM S JR.  
4440 MERRIMAC AVENUE  
SUITE 102  
JACKSONVILLE, FL 32210 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:** CONK, EDWARD W  
**Address:** 1307 W 6TH STREET, STE 214  
**City-St-Zip:** CORONA, CA 92882

**Title:** MGR  
**Name:** NEYLAND, ROBERT  
**Address:** 1307 W 6TH STREET, STE 214  
**City-St-Zip:** CORONA, CA 92882

**Title:** MGR  
**Name:** RINKE, BARRY  
**Address:** 1307 W 6TH STREET, STE 214  
**City-St-Zip:** CORONA, CA 92882

**Title:** MGR  
**Name:** SANDLER, PAUL  
**Address:** 1307 W 6TH STREET, STE 214  
**City-St-Zip:** CORONA, CA 92882

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:** WILLIAM S. ROGERS, JR.

VP

04/09/2012

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