

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000006533

FILED
Apr 14, 2011
Secretary of State

Entity Name: ERA MED LLC

Current Principal Place of Business:

#1 EARHART DRIVE
SUITE #11
COATESVILLE, PA 19320

New Principal Place of Business:

1 EARHART DRIVE
SUITE 11
COATESVILLE, PA 19320

Current Mailing Address:

2200 ELLER DRIVE, P.O. BOX 13038
ATTN: LEGAL DEPARTMENT
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 72-1621754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: PRES
Name: VAN DE VUURST, ROBERT
Address: 600 AIRPORT ROAD
City-St-Zip: LAKE CHARLES, LA 70605 US

Title: DIR
Name: WASHECKA, ED DIR.
Address: 460 PARK AVENUE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: S/T
Name: GOSS, ANNA SEC.
Address: 11200 RICHMOND AVENUE, SUITE 400
City-St-Zip: HOUSTON, TX 77082

Title: DIR
Name: FAGERSTAL, DICK
Address: 460 PARK AVENUE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10022

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: ED WASHECKA DIR 04/14/2011

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