

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025831

**FILED
Jan 30, 2013
Secretary of State
CC0504776655**

Entity Name: METROPOLITAN 610612 PRACTICE LLC

Current Principal Place of Business:

3245 SW 34TH ST.
OCALA, FL 34474

Current Mailing Address:

3245 SW 34TH ST.
OCALA, FL 34474

FEI Number: 20-4561174

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIXON, CHERYL MD
3245 SW 34TH ST.
OCALA, FL 34474 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name WOESTE, JOHN T
Address 13866 WHITE HERON PLACE
City-State-Zip: JACKSONVILLE FL 32224

Title MGRM
Name JIMENEZ, J. FRANCISCO
Address 116 SEVEN IRON COURT
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title MGRM
Name DIXON, CHERYL L
Address 144 SEA ISLAND DRIVE
City-State-Zip: PONTE VEDRA BEACH FL 32082

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHERYL L. DIXON, MD

PARTNER

01/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date