

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049050

Entity Name: MEDICAL INFORMATION BANK, LLC

Current Principal Place of Business:

3783 BENEVA OAKS BLVD
SARASOTA, FL 34238

Current Mailing Address:

3783 BENEVA OAKS BLVD
SARASOTA, FL 34238

FEI Number: 26-1817591

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEIN, DANIEL PMD
3783 BENEVA OAKS BLVD
SARASOTA, FL 34238 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 OWNER
Name STEIN, DANIEL P
Address 3783 BENEVA OAKS BLVD
City-State-Zip: SARASOTA FL 34238

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL P. STEIN, MD

OWNER

02/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date