

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092190

Entity Name: HORIZON PEDIATRICS LLC

Current Principal Place of Business:

611 SE DEMOREST ST
LIVE OAK, FL 32064

Current Mailing Address:

611 SE DEMOREST ST
LIVE OAK, FL 32064

FEI Number: 26-3454736

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCOTT, CAMMY
4424 NW AMERICAN LANE, SUITE 101
LAKE CITY, FL 32055 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 INGRAM, AMBER SMRS
Address 611 SE DEMOREST ST
City-State-Zip: LIVE OAK FL 32064

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: AMBER S. INGRAM

OWNER

04/19/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date