

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000113970

Entity Name: MARODYNE MEDICAL, LLC**Current Principal Place of Business:**3031 N ROCKY POINT DRIVE, W
STE 300
TAMPA, FL 33607**Current Mailing Address:**3031 N ROCKY POINT DRIVE, W
STE 300
TAMPA, FL 33607 US**FEI Number:** 27-1395334**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HORNE, WILLIAM E
3031 N ROCKY POINT DRIVE, W
STE 300
TAMPA, FL 33607 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:** WILLIAM E. HORNE

04/22/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MCNEILL, LANCE
Address 2000 E EDGEWOOD DR, STE 211
City-State-Zip: LAKELAND FL 33803

Title MGR
Name GRAMMEN, ROBERT
Address 3031 N ROCKY POINT DRIVE, W
City-State-Zip: TAMPA FL 33607

Title MGR
Name RUBIN, CLINTON
Address 3031 N ROCKY POINT DRIVE, W
STE 300
City-State-Zip: TAMPA FL 33607

Title MGR
Name HORNE, WILLIAM E
Address 3031 N ROCKY POINT DRIVE, W
STE 300
City-State-Zip: TAMPA FL 33607

Title MGR
Name FOOTE, PATRICK S
Address 3031 N ROCKY POINT DRIVE, W
STE 300
City-State-Zip: TAMPA FL 33607

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: PATRICK S. FOOTE

MGR

04/22/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date