#### 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000073277

Entity Name: ORLANDO PHYSICIAN SPECIALISTS, LLC

FILED Feb 14, 2013 Secretary of State CC4227523776

## **Current Principal Place of Business:**

4501 SHIRLEY AVENUE JACKSONVILLE. FL 32210

## **Current Mailing Address:**

4501 SHIRLEY AVENUE JACKSONVILLE, FL 32210 US

FEI Number: 45-2601183 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SMITH HULSEY & BUSEY, PROFESSIONAL ASSOCIA 225 WATER ST STE 1800 JACKSONVILLE, FL 32202 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 MGR

Name TERK, MITCHELL D DR.

Address 4501 SHIRLEY AVENUE

City-State-Zip: JACKSONVILLE FL 32210

SIGNATURE: MITCHELL TERK

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.

**MANAGER**