

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000142737

**Entity Name:** FORAMIS MEDICAL GROUP, LLC

**Current Principal Place of Business:**

2122 KIRKLAND LAKE DRIVE  
AUBURNDALE, FL 33823

**Current Mailing Address:**

2122 KIRKLAND LAKE DRIVE  
AUBURNDALE, FL 33823

**FEI Number:** 27-0371002

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

FLAHERTY, J. CHRISTOPHER  
2122 KIRKLAND LAKE DRIVE  
AUBURNDALE, FL 33823 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           MANAGING MEMBER  
Name           FLAHERTY, J. CHRISTOPHER  
Address        2122 KIRKLAND LAKE DRIVE  
City-State-Zip: AUBURNDALE FL 33823

Title           MANAGING MEMBER  
Name           FREY, LISA A ESQ.  
Address        354 RILEYVILLE ROAD  
City-State-Zip: RINGLES NJ 08551

Title           MANAGING MEMBER  
Name           GORMAN, WILLIAM J.  
Address        62 LAKESHORE DRIVE  
City-State-Zip: SOUTH HAMILTON MA 01982

Title           MANAGING MEMBER  
Name           JOHNSTON, RALPH S  
Address        666 MAIN STREET, STE. LV-5  
City-State-Zip: WINCHESTER MA 01890

*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:** /J. CHRISTOPHER FLAHERTY/

**MANAGING MEMBER**

**01/28/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date