

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000103645

Entity Name: CHULUOTA CLINIC, LLC

Current Principal Place of Business:

107 W 8TH ST.
CHULUOTA, FL 32766

Current Mailing Address:

2455 CURRYVILLE RD
CHULUOTA, FL 32766

FEI Number: 46-0765557

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PRUNER, KIRBY M
2455 CURRYVILLE RD
CHULUOTA, FL 32766 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 PRUNER, PAMELA K
Address 2455 CURRYVILLE RD
City-State-Zip: CHULUOTA FL 32766

Title MGRM
Name PRUNER, KIRBY M
Address 2455 CURRYVILLE RD
City-State-Zip: CHULUOTA FL 32766

Title MGRM
Name SANCHEZ, COURTNEY P
Address 790 MARGIE DR
City-State-Zip: TITUSVILLE FL 32766

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: KIRBY M. PRUNER

REGISTERED AGENT

01/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date