

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000054200

Entity Name: PHYSICIANS CONFERENCE ASSOCIATION, LLC.

Current Principal Place of Business:

509 SE RIVERSIDE DR, STE. 302
STUART, FL 34994-2579

Current Mailing Address:

509 SE RIVERSIDE DR, STE. 302
STUART, FL 34994-2579

FEI Number: 65-0808602

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRENKEL, RONALD E.P.
509 SE RIVERSIDE DR, STE. 302
STUART, FL 34994-2579 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 FRENKEL, RONALD E
Address 509 SE RIVERSIDE DR, STE. 302
City-State-Zip: STUART FL 34994-2579

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: RONALD P. FRENKEL

OWNER

01/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date