2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2014
Secretary of State
CC5260066374

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Entity Name: CLINICAL ASSOCIATES OF ORLANDO, LLC

Current Principal Place of Business:

5835 COVINGTON COVE WAY
ORLANDO, FL 32829

Current Mailing Address:

5835 COVINGTON COVE WAY
ORLANDO, FL 32829 US

FEI Number: 46-3672010

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTIN, SHAWNA
5835 COVINGTON COVE WAY
ORLANDO, FL 32829 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	Title	MGRM
Name	MARTIN, SHAWNA	Name	MARTIN, CARLTON
Address	5835 COVINGTON COVE WAY	Address	5835 COVINGTON COVE WAY
City-State-Zip:	ORLANDO FL 32829	City-State-Zip:	ORLANDO FL 32829

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: SHAWNA MARTIN OWNER 04/27/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date