2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

DOCUMENT# L00000008327

Entity Name: PHYSICIAN PLAZA, LLC

Current Principal Place of Business:

255 COREY AVENUE
ST. PETE BEACH, FL 33706

New Principal Place of Business:

Current Mailing Address:

255 COREY AVENUE
ST. PETE BEACH, FL 33706

New Mailing Address:

FEI Number: 59-3663604 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLINGEL, JOSEPH W
255 COREY AVENUE
ST. PETE BEACH, FL 33706 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: KLINGEL, JOSEPH W
Address: P.O. BOX 67128
City-St-Zip: ST. PETE BEACH, FL 33736

Title: MGRM
Name: PRAWER, JOEL
Address: P.O. BOX 67128
City-St-Zip: ST. PETE BEACH, FL 33736

Title: MGRM
Name: NORSTEIN, MARK
Address: P.O. BOX 67128
City-St-Zip: ST. PETE BEACH, FL 33736

I hereby certify that the information indicated on this 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 Statues.

SIGNATURE: JOSEPH W. KLINGEL MGRM 04/20/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date