

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031856

FILED  
Mar 11, 2008  
Secretary of State

Entity Name: MEDARTS IN THE SPRINGS, LLC

**Current Principal Place of Business:**

2901 CORAL HILLS DRIVE  
SUITE 200  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SYNDICON PROPERTIES, INC  
2901 CORAL HILLS DRIVE, #200  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 48-1299993      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BERT OLIVER, P.A.  
2060 NW BOCA RATON BLVD.  
SUITE 6  
BOCA RATON, FL 33431 US

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

BERT OLIVER, P.A.  
955 NW 17TH AVENUE  
BLDG D  
DELRAY BEACH, FL 33445 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: \_\_\_\_\_ 03/11/2008  
Electronic Signature of Registered Agent      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KOHAN, M.D., MELVIN S MGRM  
Address: 2901 CORAL HILLS DRIVE, SUITE 220  
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: BITMAN, STEWART MD  
Address: 7431 N UNIVERSITY DR #201  
City-St-Zip: TAMARAC, FL 33321

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: ZARAGOZA, BERNARD MD  
Address: 3100 CORAL HILLS DR #207  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 Statutes.

SIGNATURE: MELVIN KOHAN      MGR      03/11/2008  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date