

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056060

FILED
Jun 29, 2009
Secretary of State

Entity Name: VASCULAR SPECIALISTS OF VENICE AND SARASOTA, P.L.

Current Principal Place of Business:

600 N. CATTLEMEN RD.
SUITE 100
SARASOTA, FL 34232 US

New Principal Place of Business:

Current Mailing Address:

600 N. CATTLEMEN RD.
SUITE 100
SARASOTA, FL 34232 US

New Mailing Address:

FEI Number: 20-4412509 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KELLY, CHARLES M JR.
2390 TAMIAMI TRAIL NORTH
SUITE 204
NAPLES, FL 34103 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GRUBBS, GERALD E M.D.
Address: 600 N. CATTLEMEN RD SUITE 100
City-St-Zip: SARASOTA, FL 34232 US

ADDITIONS/CHANGES:

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: GERALD E. GRUBBS, M.D.

MGRM

06/29/2009

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