

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118660

FILED  
Jan 17, 2009  
Secretary of State

**Entity Name:** TOTAL FOOT AND ANKLE CENTER, LLC

**Current Principal Place of Business:**

10421 MOSS PARK ROAD  
ORLANDO, FL 32832

**New Principal Place of Business:**

10417 MOSS PARK ROAD  
ORLANDO, FL 32832

**Current Mailing Address:**

2500 CORBYTON COURT  
ORLANDO, FL 32828

**New Mailing Address:**

10417 MOSS PARK ROAD  
ORLANDO, FL 32832

FEI Number: 26-1138129

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLICK, JAMES J  
112 LAKE AVENUE  
ORLANDO, FL 32801 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: MGR ( ) Delete  
Name: CONTE, JOSEPH A  
Address: 10421 MOSS PARK ROAD  
City-St-Zip: ORLANDO, FL 32832

Title: MGR ( ) Delete  
Name: CONTE, NICOLE B  
Address: 10421 MOSS PARK ROAD  
City-St-Zip: ORLANDO, FL 32832

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CONTE, JOSEPH A  
Address: 10417 MOSS PARK ROAD  
City-St-Zip: ORLANDO, FL 32832

Title: MGR (X) Change ( ) Addition  
Name: CONTE, NICOLE B  
Address: 10417 MOSS PARK ROAD  
City-St-Zip: ORLANDO, FL 32832

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: NICOLE B CONTE

MGR

01/17/2009

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