

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000068890

FILED
Jan 29, 2009
Secretary of State

Entity Name: JAMES J. MCCLELLAND, M.D., P.L.

Current Principal Place of Business:

876 OLD ENGLISH AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

2909 N ORANGE AVENUE
SUITE 101
ORLANDO, FL 32804

Current Mailing Address:

876 OLD ENGLISH AVENUE
WINTER PARK, FL 32789

New Mailing Address:

2909 N ORANGE AVENUE
SUITE 101
ORLANDO, FL 32804

FEI Number: 26-2998997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLELLAND, JAMES J M.D.
876 OLD ENGLISH AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

MCCLELLAND, JAMES J MD
2909 N ORANGE AVENUE
SUITE 101
ORLANDO, FL 32804 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: JAMES J MCCLELLAND

01/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCCLELLAND, JAMES J M.D.
Address: 876 OLD ENGLISH AVENUE
City-St-Zip: WINTER PARK, FL 32789

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: JAMES J MCCLELLAND

MD

01/29/2009

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