2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L08000113250

Entity Name: FLORIDA PULMONARY RESEARCH INSTITUTE, LLC

Current Principal Place of Business:

1788 W. FAIRBANKS AVENUE, SUITE A
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1788 W. FAIRBANKS AVENUE, SUITE A
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORAN, THOMAS P
111 NORTH ORANGE AVENUE, SUITE 1200
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: FAKIH, FAISAL A
Address: 1788 W. FAIRBANKS AVENUE, SUITE A
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: FAISAL A. FAKIH MGR 04/30/2009

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