

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089594

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** CENTRAL FLORIDA SPINE INSTITUTE, PLLC

**Current Principal Place of Business:**

1500 SE MAGNOLIA EXTENSION  
SUITE 104  
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

1500 SE MAGNOLIA EXTENSION  
SUITE 104  
OCALA, FL 34471 US

**New Mailing Address:**

FEI Number: 20-5529258      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:**

PARAISO, JAMES J  
4537 AYRSHIRE DRIVE  
SPRING HILL, FL 34609 US

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

PARAISO, JAMES J  
2810 SE 30 ST  
OCALA, FL 34471 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 PARAISO

05/01/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PARAISO, JAMES J  
Address: 4537 AYRSHIRE DRIVE  
City-St-Zip: SPRING HILL, FL 34609 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PARAISO, JAMES J  
Address: 2810 SE 30 ST  
City-St-Zip: OCALA, FL 34471 US

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 PARAISO

MGRM

05/01/2007

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