

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117646

FILED
Jan 27, 2009
Secretary of State

Entity Name: ST. JOHN'S PROFESSIONAL CENTRE, LLC

Current Principal Place of Business:

6104 EAGLE NEST DRIVE
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

6104 EAGLE NEST DRIVE
JUPITER, FL 33458

New Mailing Address:

FEI Number: 20-8023433 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MORVILLO, ROBERT G
6104 EAGLES NEST DRIVE
JUPITER, FL 33458 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: MORVILLO, ROBERT G
Address: 6104 EAGLE NEST DRIVE
City-St-Zip: JUPITER, FL 33458

Title: MGR () Delete
Name: MORVILLO, GERALD G
Address: 6104 EAGLE NEST DRIVE
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT G MORVILLO PRES 01/27/2009

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