

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000022618

Entity Name: J.H. CHO, MD, LLC

**FILED**  
**Mar 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

14451 UNIVERSITY COVE PLACE  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

14451 UNIVERSITY COVE PLACE  
TAMPA, FL 33613

**New Mailing Address:**

FEI Number: 20-4359764

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

F & L CORP  
ONE INDEPENDENT DR  
STE 1300  
JACKSONVILLE, FL 32202 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: MGRM  
Name: CHO, J.H.  
Address: 6381 MACLAURIN DRIVE  
City-St-Zip: TAMPA, FL 33647

I hereby 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: JAI H. CHO, M.D.

MGRM

03/16/2010

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