

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025404

Entity Name: PHYSICIANS GROUP OF SARASOTA, L.L.C.

Current Principal Place of Business:

4054 SAWYER ROAD
SARASOTA, FL 34233

Current Mailing Address:

4054 SAWYER ROAD
SARASOTA, FL 34233

FEI Number: 20-3971652

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name KOMPOTHECRAS, GARY
Address 4054 SAWYER ROAD
City-State-Zip: SARASOTA FL 34233

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY KOMPOTHECRAS

MANAGER

03/27/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date