

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007971

FILED
Apr 21, 2008
Secretary of State

Entity Name: DUNLAWTON MEDICAL ASSOCIATES, LLC

Current Principal Place of Business:

790 DUNLAWTON AVE
SUITE E
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

790 DUNLAWTON AVE
SUITE E
PORT ORANGE, FL 32127

New Mailing Address:

FEI Number: 59-3659620 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BILLMEIR, DAVID MD
790 DUNLAWTON AVE.
SUITE E
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

BILLMEIER, DAVID MD
790 DUNLAWTON AVE.
SUITE E
PORT ORANGE, FL 32127 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: DAVID BILLMEIER, MD 04/21/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BILLMEIER, DAVID MD
Address: 790 DUNLAWTON AVE. STE E
City-St-Zip: PORT ORANGE, FL 32127

Title: MGR () Delete
Name: KENDRICK, MARK MD
Address: 790 DUNAWTON AVE. STE E
City-St-Zip: PORT ORANGE, FL 32127

Title: MGRM () Delete
Name: BERNANDO, GEORGE MD
Address: 790 DUNLAWTON AVE. STE E
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES:

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

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: DAVID W. BILLMEIER, MD PRES 04/21/2008

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