

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011938

Entity Name: NIGEL A. SPIER, M.D., LLC

FILED  
Feb 08, 2005  
Secretary of State

**Current Principal Place of Business:**

3990 SHERIDAN STREET  
SUITE 207  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

3990 SHERIDAN STREET  
SUITE 207  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 65-1046375

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIER, NIGEL A  
3691 N 52ND AVE  
HOLLYWOOD, FL 33021 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SPIER, NIGEL A  
Address: 3691 N 52ND AVE  
City-St-Zip: HOLLYWOOD, FL 33021

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NIGEL A. SPIER

MGR

02/08/2005

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