2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 29, 2009
Secretary of State

DOCUMENT# L01000012352

Entity Name: KENNETH A. NEIFELD, M.D., P.L.

Current Principal Place of Business:

1099 5TH AVE NORTH
SUITE 220
ST. PETERSBURG, FL 33705

New Principal Place of Business:

1099 5TH AVE NORTH
SUITE 130
ST. PETERSBURG, FL 33705

Current Mailing Address:

1099 5TH AVE NORTH
SUITE 220
ST. PETERSBURG, FL 33705

New Mailing Address:

1099 5TH AVE NORTH
SUITE 130
ST. PETERSBURG, FL 33705

FEI Number: 59-3733396 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KENNEDY, JAMES R JR ESQ
856 2ND AVENUE NORTH
ST. PETERSBURG, FL 33701 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 ( ) Delete
Name: NEIFELD, KENNETH A MD
Address: 1099 5TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33705

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 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: KENNETH A NEIFELD MGMR 06/29/2009

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