## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013714

Entity Name: LR MEDICAL PROPERTIES, L.L.C.

Apr 22, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1924 S OSPREY AVE PO BOX 1329 SARASOTA, FL 34230

SUITE 202 SARASOTA, FL 34239

**Current Mailing Address: New Mailing Address:** 

PO BOX 1329 SARASOTA, FL 34230

FEI Number: 65-0335150 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MCGINNESS, W. LEE 1800 SECOND STREET, SUITE 971 SARASOTA, FL 34236

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: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change ( ) Addition GREENSTREET, INC. GREENSTREET, INC. Name: Name:

Address: 1924 SOUTH OSPREY AVENUE, STE. 200 Address: 1924 S OSPREY AVENUE, SUITE 202

City-St-Zip: SARASOTA, FL 34239 City-St-Zip: SARASOTA, FL 34239

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: WILLIAM D. GRIFFIN **MMBR** 04/22/2009