2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000015051

T. ETITIS NATION LAKE UNDERHILL PROFESSIONAL BUILDING, L.L.C.



Principal Place of Business

Mailing Address

7824 LAKE UNDERHILL ROAD, SUITES D & E ORLANDO, FL 32822

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FILED Jan 19, 2006 08:00 AM **Secretary of State**



01062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3744319

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ALPEROVICH, ALEXANDER 7824 LAKE UNDERHILL ROAD, SUITES D & E ORLANDO, FL 32822

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8. The above named entity submits this statement:	or the purpose of changing its registered office or i	registered agent, or both, in the State of Florid	a.) am familiar with, and accept
the obligations of registered agent.			

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALPEROVICH, ALEXANDER MD 7824 LAKE UNDERHILL RD STE D&E ORLANDO, FL 32822
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KELLY, BRAIN D DO 7824 LAKE UNDERHILL RD STE D&E ORLANDO, FL 32822
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARRIS, GLENN K MD 7824 LAKE UNDERHILL RO STE D&E ORLANDO, FL 32822
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CSTY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	

01/24/06-80012-019 50.00

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF INING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE -16-06

407-273-2378