2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000015051

1. Entity Name

LAKE UNDERHILL PROFESSIONAL BUILDING, L.L.C.



FILED Mar 18, 2003 8:00 am Secretary of State 03-18-2003 90152 036 ****50.00

7824 LAKE U	NOERHILL ROAD. SUITES D & E	Mailing Address 7824 LAKE UNDERHILL ROAD, SUITES D & E		-					
ORLANDO FL	. 32822,	ORLANDO FL 32822			 	ALBU DIJ KRISTI NIBIJ KRIJI BODI BODI	A ANG ÉR ON N	88) Allik Dala	11 0 (1 0)
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Nur	mber 59-3744319	<u> </u>		Applied For
Zip Country		Zip Count		ry	5. Certificate of Status Desired S5.00 Additional Fee Required			Not Applicable	
	6. Name and Address of Curren	t Registered Agent			7. Name a	nd Address of New Re			
A11	SEROMOLI ALEVANDED			Name			giotei ca A	gent	_
ALI	PEROVICH, ALEXANDER								
782 OR	24 lake underhill road, suite Lando fl 32822	; D & E		Street Address (P.O. Box Number is Not Acceptable)					
			ſ	City	<u>-</u>		FL	Zip Co	de
8. The above	e named entity submits this statement for	or the purpose of changing i	its registere	d office or registers	od agont or i	noth in the Case of Flact	<u> </u>		
the obliga	tions of registered agent.	are purposed of changing	to registere	a office of registere	o agent, or t	ooth, in the State of Flori	da. Lam ta	ımiliar with	, and accept
SIGNATURE									
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NC	OTE: Registered	Agent signature required w	when reinstating)		DATE		
				EE IS \$50.00			5/112		
•		Make Check Paya							
			ue By Ma		t of State				
9.	MANAGNIGATION			y 1, 2003					
TITLE	MANAGING MEMBE		10.			ADDITIONS/C	HANGES		
NAME	ALPEROVICH, ALEXANDER MD	☐ Delete	TITLE	1				☐ Change	☐ Addition
STREET ADDRESS	7824 LAKE UNDERHILL RD STE	. Doc	NAME						
CITY-ST-ZIP	ORLANDO FL 32822	: D&E		ADDRESS					1
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STREET ADDRESS	HARRIS, GLENN K MD	- DAE	NAME						_
CITY-ST-ZIP	7824 LAKE UNDERHILL RD STE ORLANDO FL 32822	DAE		ADDRESS					ļ
	ONLANDO PL 32822		CITY-S	T-ZIP					
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NAME STREET ADDRESS (NAME	1			-	a-	
STREET ADDRESS (CITY-ST-ZIP			STREET A	ADDRESS	•				
			CITY-ST						
I hereby ce	ertify that the information supplied with	this filing does not qualify for	the evene	tion stated in Court		#15 mm 1 h m			

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 impowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE