2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020480

Entity Name: DEBARY PROFESSIONAL CENTER, L.L.C.

FILED Jan 17, 2009 Secretary of State

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

609 N. U.S. HIGHWAY 17-92, STE. 101 190 N. U.S. HIGHWAY 17-92, STE. 104

DEBARY, FL 32713 DEBARY, FL 32713

Current Mailing Address: New Mailing Address:

609 N. U.S. HIGHWAY 17-92 STE 105 190 N. U.S. HIGHWAY 17-92 STE 104

DEBARY, FL 32713 STE 104
DEBARY, FL 32713

FEI Number: 90-0008924 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:

DEGROOD, MICHAEL E
609 N. U.S. HIGHWAY 17-92, STE. 105

DEGROOD, MICHAEL E
190 N. U.S. HIGHWAY 17-92, STE. 104

DEBARY, FL 32713 US DEBARY, FL 32713 US

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: MICHAEL DEGROOD 01/17/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 DEGROOD, MICHAEL
 Name:
 DEGROOD, MICHAEL

 Address:
 609 N. HWY 17-92 STE. 105
 Address:
 190 N. HWY 17-92 STE. 104

 City-St-Zip:
 DEBARY, FL 32713
 City-St-Zip:
 DEBARY, FL 32713

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: DAY-OSTEEN, SHARON Name: DAY-OSTEEN, SHARON Address: 609 N. HWY 17-92. STE. 101 Address: 190 N. HWY 17-92. STE. 101

City-St-Zip: DEBARY, FL 32713 City-St-Zip: DEBARY, FL 32713

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: MICHAEL DEGROOD DR 01/17/2009