

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020530

FILED
Jan 05, 2009
Secretary of State

Entity Name: ALEXANDER MEDICAL GROUP, LLC

Current Principal Place of Business:

12416 66TH STREET NORTH
LARGO, FL 33773

New Principal Place of Business:

Current Mailing Address:

12416 66TH STREET NORTH
LARGO, FL 33773

New Mailing Address:

FEI Number: 16-1626040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, VLADIMIR A
12416 66TH STREET NORTH
LARGO, FL 33773 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: MGR () Delete
Name: ALEXANDER, ALLAN J
Address: 12416 66TH STREET NORTH
City-St-Zip: LARGO, FL 33773

Title: MGRM () Delete
Name: ALEXANDER, JENNY E
Address: 12416 66TH STREET NORTH
City-St-Zip: LARGO, FL 33773

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: KORECKIJ, THEODORE MD
Address: 12416 66TH STREET NORTH
City-St-Zip: LARGO, FL 33773

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: ALLAN J. ALEXANDER

MGR

01/05/2009

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