## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L01000021709

City-St-Zip:

EUSTIS, FL 32736

FILED Apr 29, 2009 Secretary of State

Entity Name: GASTRO-INTESTINAL CONSULTANTS OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business: New Principal Place of Business:** 2060 N. DONNELLY ST. MOUNT DORA, FL 32757 US **Current Mailing Address: New Mailing Address:** PO BOX 1077 MOUNT DORA, FL 32756 US FEI Number: 80-0006481 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: NAGABHAIRU, LALBAHADUR 2060 N DONNELLY ST MOUNT DORA, FL 32757 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete NAGABHAIRU, LALBAHADUR Name: Name: Address: 2060 N DONNELLY ST Address: City-St-Zip: MT DORA, FL 32757 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change ( ) Addition Name: BHARATHI, RAMAIAN Name: BHARATHI, RAMAIAH Address: 3024 PALEAMO COURT Address: 3024 PALERMO COURT City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: MOUNT DORA, FL 32757 Title: MGR ( ) Delete Title: () Change () Addition SOUNDARAPANDIAN, BASKAR Name: Name: Address: 3402 E MOONLIGHT LANE Address:

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.

City-St-Zip:

SIGNATURE: LALBAHADUR NAGABHAIRU MGR 04/29/2009