

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L01000021790

**FILED**  
**Nov 22, 2009**  
**Secretary of State****Entity Name:** PULMONOLOGY AND SLEEP CENTER LLC**Current Principal Place of Business:**2300 SOUTH CONGRESS AVENUE  
SUITE 101  
BOYNTON BEACH, FL 33426**New Principal Place of Business:****Current Mailing Address:**PO BOX 550  
BOYNTON BEACH, FL 33435**New Mailing Address:****FEI Number:** 65-1157149**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BANDOH, JACQUELINE  
10849 LAKE WYNDS CT  
BOYNTON BEACH, FL 33437 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:** MGRM ( ) Delete  
**Name:** TACKEY, FREDERICK  
**Address:** 2300 SOUTH CONGRESS AVENUE SUITE 101  
**City-St-Zip:** BOYNTON BEACH, FL 33426**Title:** MGRM (X) Delete  
**Name:** BANDOH, JACQUELINE  
**Address:** 2300 SOUTH CONGRESS AVENUE SUITE 101  
**City-St-Zip:** BOYNTON BEACH, FL 33426**ADDITIONS/CHANGES:****Title:** MGRM (X) Change ( ) Addition  
**Name:** TACKEY, FREDERICK  
**Address:** 2300 SOUTH CONGRESS AVENUE SUITE 101  
**City-St-Zip:** BOYNTON BEACH, FL 33426 US**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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: FREDERICK TACKEY

MGRM

11/22/2009

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