

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000010135

Entity Name: JACK GUTIERREZ, LLC

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

10000 W. SAMPLE ROAD  
SUITE A  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

10000 W. SAMPLE ROAD  
SUITE A  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

FEI Number: 04-3656626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GUTIERREZ, GIL F M.D  
10000 WEST SAMPLE ROAD  
CORAL SPRINGS, FL 33065 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: P  
Name: GUTIERREZ, GIL F M.D.  
Address: 10000 W SAMPLE RD  
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: P  
Name: FAXAS, TERESA A M.D.  
Address: 10000 W SAMPLE RD  
City-St-Zip: CORAL SPRINGS, FL 33065 US

I hereby 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: GIL F GUTIERREZ,M.D

MEMB

04/27/2010

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