2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000014523

535 CENTRAL AVENUE

City-St-Zip: ST. PETERSBURG, FL 33701

Address:

Entity Name: MICHAEL F. COHEN, PH.D., L.L.C.

FILED Jul 03, 2007 Secretary of State

Current P	Principal Place of Business:	New Principal Pla	New Principal Place of Business:	
SUITE 300	TRAL AVENUE 0 RSBURG, FL 33701			
Current M	failing Address:	New Mailing Add	New Mailing Address:	
SUITE 300	TRAL AVENUE) RSBURG, FL 33701			
In accordan	r: 06-1683981 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the limited liability d Address of Current Registered Agent:	• •		
535 CEÑT SUITE 300	MICHAEL F PHD FRAL AVENUE) TERSBURG, FL 33701 US			
	e named entity submits this statement for the of Florida.	ne purpose of changing its regist	tered office or registered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Registered	Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES	S:	
Title: Name: Address: City-St-Zip:	MGR () Delete COHEN, MICHAEL F 535 CENTRAL AVENUE, SUITE 300 ST. PETERSBURG, FL 32701	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGR () Delete COHEN, IRENE C	Title: Name:	() Change () Addition	

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: MICHAEL F. COHEN, PH.D. MGR 07/03/2007