

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027827

FILED
Jan 12, 2009
Secretary of State

Entity Name: EPSILON, L.L.C.

Current Principal Place of Business:

7509 STATE ROAD 52, SUITE 210
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

7509 STATE ROAD 52, SUITE 210
HUDSON, FL 34667

New Mailing Address:

FEI Number: 14-1851772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMAN, ALAN S
1245 COURT STREET SUITE 102
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

TORRENCE, JR., ALFRED W
6709 RIDGE ROAD
PORT RICHEY, FL 34668 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: ALFRED W. TORRENCE, JR.

01/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MEDICAL ASSOCIATES O, F WEST FLORIDA LLP
Address: 7509 STATE ROAD 52, SUITE 210
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: TAYLOR, WAYNE R PRES
Address: 7509 STATE ROAD 52, SUITE 210
City-St-Zip: HUDSON, FL 34667

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: WAYNE R. TAYLOR, M.D.

PRES

01/12/2009

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