

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000028154

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** EVOS WESTSHORE TPA, LLC

**Current Principal Place of Business:**

157 WESTSHORE PLAZA  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

609 SOUTH HOWARD AVE.  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:** 13-4216824

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRASSAS, ALKIS  
609 SOUTH HOWARD AVE.  
TAMPA, FL 33606 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  
Name: EVOS MANAGEMENT, LLC  
Address: 609 S. HOWARD AVE.  
City-St-Zip: TAMPA, FL 33606

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: EVOS MANAGEMENT, LLC

MGRM

04/30/2010

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