

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030039

FILED
Jan 06, 2010
Secretary of State

Entity Name: SOUTHEAST VASCULAR GROUP, P.L.

Current Principal Place of Business:

1717 NORTH E STREET STE. 533
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

5149 N 9TH AVE
G21
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 42-1563304 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

YONEHIRO, LAYNE RADKIN MD
1717 NORTH E STREET STE. 533
PENSACOLA, FL 32501 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: YONEHIRO, LAYNE R
Address: 1717 N E ST STE 533
City-St-Zip: PENSACOLA, FL 32501

Title: MGRM
Name: KAFIE, FERNANDO E MD
Address: 1717 N. 'E' ST., STE 533
City-St-Zip: PENSACOLA, FL 32501

Title: MGRM
Name: ALLMON, JON C
Address: 1717 N. 'E' ST., STE 533
City-St-Zip: PENSACOLA, FL 32501

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: LAYNE R. YONEHIRO, MD

MD

01/06/2010

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