

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030967

Entity Name: PSYCHIATRIC REALTY, LLC

FILED  
Mar 13, 2007  
Secretary of State

**Current Principal Place of Business:**

12641 WORLD PLAZA LANE #56  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

12641 WORLD PLAZA LANE #56  
FORT MYERS, FL 33907

**New Mailing Address:**

FEI Number: 65-1170400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TROIANO, JOSEPH A  
2320 FIRST ST., STE. 1000  
FORT MYERS, FL 33901 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: PTNR ( ) Change (X) Addition  
Name: BUCHHOLZ, ROBERT A DR.  
Address: 12641 WORLD PLAZA LANE, #56  
City-St-Zip: FORT MYERS, FL 33907

Title: PTNR ( ) Change (X) Addition  
Name: KEEFER, BRENDA L DR.  
Address: 12641 WORLD PLAZA LANE, #56  
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the 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: DR. BRENDA L. KEEFER

PTNR

03/13/2007

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