

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008631

FILED
Mar 11, 2010
Secretary of State

Entity Name: ST. AUGUSTINE EAR, NOSE, AND THROAT, L.L.C.

Current Principal Place of Business:

1301 PLANTATION ISLAND DRIVE
UNIT 401
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

1301 PLANTATION ISLAND DRIVE S.
UNIT 401
ST. AUGUSTINE, FL 32080

Current Mailing Address:

1301 PLANTATION ISLAND DRIVE
UNIT 401
ST. AUGUSTINE, FL 32080

New Mailing Address:

1301 PLANTATION ISLAND DRIVE S
UNIT 401
ST. AUGUSTINE, FL 32080

FEI Number: 13-4241972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEPASQUALE, MARCUS C MEMBER
653 TREEHOUSE CIRCLE
ST. AUGUSTINE, FL 32095 US

Name and Address of New Registered Agent:

DEPASQUALE, MARCUS C MEMBER
2645 OAK GROVE AVENUE
ST. AUGUSTINE, FL 32092 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:

03/11/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: DR
Name: DEPASQUALE, KALPANA S MGR
Address: 1301 PLANTATION ISLAND DRIVE S.; UNIT 401
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MR
Name: DEPASQUALE, MARCUS C MEMBER
Address: 1301 PLANTATION ISLAND DRIVE S.; UNIT 401
City-St-Zip: ST. AUGUSTINE, FL 32080

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: KALPANA DEPASQUALE

MGR

03/11/2010

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