

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015420

FILED
Jan 22, 2008
Secretary of State

Entity Name: MANATEE 701 PARTNERS, LLC

Current Principal Place of Business:

701 MANATEE AVE W
SUITE 202
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

701 MANATEE AVE W
SUITE 202
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 05-0567031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLALOCK, LANDERS, WALTERS & VOGLER, PA
802 11TH ST. WEST
BRADENTON, FL 34205 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 () Delete
Name: GRENIER, MARC MD
Address: 3812 RIVERVIEW BLVD. W
City-St-Zip: BRADENTON, FL 34209

Title: MGRM () Delete
Name: GURUCHARRI, MICHAEL MD
Address: 707 58TH ST NW
City-St-Zip: BRADENTON, FL 34209

Title: MGRM () Delete
Name: HOBAN, BRIAN MD
Address: PO BOX 14032
City-St-Zip: BRADENTON, FL 34280

Title: MGRM () Delete
Name: KALATHIA, AXAY MD
Address: 20109 79TH AVE E
City-St-Zip: BRADENTON, FL 34202

Title: MGRM () Delete
Name: MORRISH, THOMAS MD
Address: 3500 RIVERVIEW BLVD W
City-St-Zip: BRADENTON, FL 34209

Title: MGRM () Delete
Name: NALL, AGNES MD
Address: 1945 LINCOLN DRIVE
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HAZEL FORD

MGRM

01/22/2008

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