

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020319

FILED
Mar 27, 2009
Secretary of State

Entity Name: ROBERT P. ALBERGO, M.D. L.L.C.

Current Principal Place of Business:

4132 WOODLANDS PARKWAY
PALM HARBOR, FL 34685

New Principal Place of Business:

Current Mailing Address:

4132 WOODLANDS PARKWAY
PALM HARBOR, FL 34685

New Mailing Address:

FEI Number: 05-0571088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBERGO, ROBERT P M.D.
4132 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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: MGR () Delete
Name: ALBERGO, ROBERT P M.D.
Address: 4132 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES:

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: ROBERT P ALBERGO MD

MGR

03/27/2009

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