

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026004

FILED
Mar 27, 2007
Secretary of State

Entity Name: FLEMING ISLAND FOOT AND ANKLE CENTER, LLC

Current Principal Place of Business:

168 BLANDING BLVD.
SUITE 2
ORANGE PARK, FL 32073 US

New Principal Place of Business:

300 KINGSLEY LAKE DRIVE
SUITE 402
ST. AUGUSTINE, FL 32092 US

Current Mailing Address:

168 BLANDING BLVD.
SUITE 2
ORANGE PARK, FL 32073 US

New Mailing Address:

300 KINGSLEY LAKE DRIVE
SUITE 402
ST. AUGUSTINE, FL 32092 US

FEI Number: 56-2342626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAGOUTARIS, EFSTRATIOS D DPM
168 BLANDING BLVD., STE 2
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

LAGOUTARIS, EFSTRATIOS D DPM
300 KINGSLEY LAKE DRIVE
SUITE 402
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:

03/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LAGOUTARIS, EFSTRATIOS D
Address: 168 BLANDING BLVD., STE 2
City-St-Zip: ORANGE PARK, FL 32073

Title: MGRM () Delete
Name: LAGOUTARIS, EMMANUEIL D
Address: 168 BLANDING BLVD., STE 2
City-St-Zip: ORANGE PARK, FL 32073

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LAGOUTARIS, EFSTRATIOS D
Address: 300 KINGSLEY LAKE DRIVE, STE. 402
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM (X) Change () Addition
Name: LAGOUTARIS, EMMANUEL D
Address: 300 KINGSLEY LAKE DRIVE., STE. 402
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM () Change (X) Addition
Name: LAGOUTARIS, JOHN D
Address: 300 KINGSLEY LAKE DRIVE, STE. 402
City-St-Zip: ST. AUGUSTINE, FL 32092

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: EMMANUEL LAGOUTARIS

MGRM

03/27/2007

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