

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027241

FILED
Apr 24, 2008
Secretary of State

Entity Name: CROWN POINTE PROFESSIONAL CENTER OF TAMPA, LLC

Current Principal Place of Business:

19302 GUNN HIGHWAY
ODESSA, FL 33556

New Principal Place of Business:

18936 N DALE MABRY HWY
LUTZ, FL 33548

Current Mailing Address:

PO BOX 128
ODESSA, FL 33556

New Mailing Address:

FEI Number: 56-2379792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWELL, KEVIN E JR.
19302 GUNN HIGHWAY
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

HOWELL, KEVIN E JR.
18936 N DALE MABRY HWY
LUTZ, FL 33548 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:

04/24/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOWELL, KEVIN E JR.
Address: 19302 GUNN HIGHWAY, P.O. BOX 128
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HOWELL, KEVIN E JR.
Address: 18936 N DALE MABRY HWY
City-St-Zip: LUTZ, FL 33548

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: KEVIN E HOWELL JR

MGRM

04/24/2008

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