## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2007 08:00 Al
Secretary of State

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	Γ#L03000031135	

1. Entity Name
PODIATRY PROPERTIES, LLC



Principal Place of Business 2201 JENKS AVENUE PANAMA CITY, FL 32405 Mailing Address

2201 IENKS AVENUE PANAMA CITY, FL 32405



## DO NOT WRITE IN THIS SPACE

03132007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0164936 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

850769 03 25

6. Name and Address of Current Registered Agent

HODSON, LARRY L D.P.M. 2201 JENKS AVENUE PANAMA CITY, FL 32405

SIGNATURE

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan- ons of registered agent.	ging its registere	d office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, lyped or printed name of registered agent and life if applicable	(NOTE, Registered	Agent signature required when reinstuding)	DATE
	ling Fee is \$50.00 ue by May 1, 2007			n de la companya de l
9.	MANAGING MEMBERS/MANAGERS	· -	<del></del>	
title Name Street address City-St-Zip	MGRM HODSON, LARRY L DPM 2201 JENKS AVENUE PANAMA CITY, FL 32405		·	
TITLE MAME STREET ADDRESS CITY-ST-ZIP		,		U00000670048 U3/27/07-80036-017 50.
TITLE NAME STREET ADDRESS CITY-ST-Z:P	-		DO NO	OT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THI	S SPACE
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11. I hereby indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature sibility company or the receiver or trustee empowered to execute	qualify for the ex half have the sar cute this report	remptions contained in Chapter 119, Floric ne legal effect as if made under oath; that as required by Chapter 608, Florida Statut	a Statutes. I further certify that the Information is am a managing member or manager of the es.