

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032386

FILED
Feb 11, 2012
Secretary of State

Entity Name: THE WOODRUFF INSTITUTE, L.L.C.

Current Principal Place of Business:

2235 VENETIAN COURT UNIT #1
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

2235 VENETIAN COURT UNIT #1
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 20-0113558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICI, JAMES R ESQ.
C/O COX & NICI
1185 IMMOKALEE ROAD, SUITE 110
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

NICI, JAMES R ESQ.
NICI LAW FIRM, P.L.
1185 IMMOKALEE ROAD, SUITE 110
NAPLES, FL 34110 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:

02/11/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LAMBERT, REBECCA M.D.
Address: 2129 MISSION DRIVE
City-St-Zip: NAPLES, FL 34109 US

Title: MGR
Name: SONNE, JONATHAN M.D.
Address: 2129 MISSION DRIVE
City-St-Zip: NAPLES, FL 34109 US

Title: PS
Name: SONNE, JONATHAN M.D.
Address: 2129 MISSION DRIVE
City-St-Zip: NAPLES, FL 34109 US

Title: VPT
Name: LAMBERT, REBECCA M.D.
Address: 2129 MISSION DRIVE
City-St-Zip: NAPLES, FL 34109 US

I hereby 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: JONATHAN SONNE, M.D.

MGR

02/11/2012

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