

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000042562

**Entity Name:** NAFISA A. TEJPAN, M.D., PL

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2501 N. ORANGE AVENUE, SUITE 513  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

2501 N. ORANGE AVENUE, SUITE 513  
ORLANDO, FL 32804

**New Mailing Address:**

**FEI Number:** 59-2101487

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NAFISA, TEJPAN  
2501 N. ORANGE AVE  
513  
ORLANDO, FL 32804 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: MGRM  
Name: TEJPAN, NAFISA M.D.  
Address: 2501 N. ORANGE AVE., SUITE 513  
City-St-Zip: ORLANDO, FL 32804

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: NAFISA TEJPAN

MGRM

04/08/2010

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