

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049179

FILED
Apr 01, 2007
Secretary of State

Entity Name: THE PROFESSIONAL NETWORK OF SARASOTA, LLC

Current Principal Place of Business:

4312 PINE MEADOW LN
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4312 PINE MEADOW LN
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 27-0075502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, JENNY
1501 LAUREL STREET, #102
SARASOTA, FL 34236 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: MGR () Delete
Name: FUORRY, ELAINE P
Address: 1125 BOGEY LN
City-St-Zip: LONG BOAT KEY, FL 34228

Title: MGRM () Delete
Name: SMITH, CATHY VP
Address: 2 N TAMIAAMI TR #1100
City-St-Zip: SARASOTA, FL 34236

Title: MGRM () Delete
Name: LANDIS, LORI S
Address: 3204 GULF GATE DR
City-St-Zip: SARASOTA, FL 34231

Title: MGRM () Delete
Name: DEEHR, JEFF T
Address: 4312 PINE MEADOW LN
City-St-Zip: SARASOTA, FL 34233

Title: MGRM () Delete
Name: SIPES, TED B
Address: 403 BEARDED OAKS CIR
City-St-Zip: SARASOTA, FL 34232

Title: MGRM () Delete
Name: CONK, SONDR B
Address: 2852 HARDEE DR
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HONNEYCUTT, VICTOR P
Address: 1800 BAY RD
City-St-Zip: SARASOTA, FL 34239

Title: MGRM (X) Change () Addition
Name: HAAB, KEN VP
Address: 2571 12TH ST
City-St-Zip: SARASOTA, FL 34237

Title: MGRM (X) Change () Addition
Name: MEESIT, MARIA S
Address: 4801 SWIFT RD, STE 1
City-St-Zip: SARASOTA, FL 34231

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: JACOB, DAVID B
Address: 4553 MARIOTTI #105
City-St-Zip: SARASOTA, FL 34233

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEFFREY J. DEEHR

TR

04/01/2007

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