

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000508

FILED  
May 28, 2008  
Secretary of State

**Entity Name:** RINELLA FAMILY LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

4900 W. BROWARD BLVD.  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

4900 W. BROWARD BLVD.  
PLANTATION, FL 33317

**New Mailing Address:**

**FEI Number:** 20-1042444      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

RINELLA, JOHN  
4900 W BROWARD BLVD  
PLANTATION, FL 33317    US

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

RINELLA, JOHN L MD  
4900 W BROWARD BLVD  
PLANTATION, FL 33317    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: JOHN L. RINELLA, M.D.

05/28/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: RINELLA, JOHN  
Address: 4900 W. BROWARD BLVD.  
City-St-Zip: PLANTATION, FL 33317

**ADDITIONS/CHANGES:**

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

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: JOHN L. RINELLA

MGR

05/28/2008

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