

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014925

FILED
Apr 15, 2009
Secretary of State

Entity Name: THE HOUSE DOCTOR OF BREVARD, LLC

Current Principal Place of Business:

661 COCOANUT GROVE AVENUE
WEST MELBOURNE, FL 329042134 US

New Principal Place of Business:

Current Mailing Address:

661 COCOANUT GROVE AVENUE
WEST MELBOURNE, FL 329042134 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PATTERSON, WENDY P
661 COCOANUT GROVE AVENUE
WEST MELBOURNE, FL 329042134 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: PATTERSON, JAMES A
Address: 661 COCOANUT GROVE AVENUE
City-St-Zip: WEST MELBOURNE, FL 329042134 US

Title: MGRM () Delete
Name: PATTERSON, WENDY P
Address: 661 COCOANUT GROVE AVENUE
City-St-Zip: WEST MELBOURNE, FL 329042134 US

ADDITIONS/CHANGES:

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

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: JIM PATTERSON

MGRM

04/15/2009

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