2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031844

Entity Name: CAROLYN SCOTT CAIN, M.D., L.L.C.

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2775 SW 53RD STREET 2775 SW 53RD STREET OCALA, FL 34474 OCALA, FL 34471

Current Mailing Address: New Mailing Address:

2775 SW 53RD STREET 2775 SW 53RD STREET OCALA, FL 34474 OCALA, FL 34471

FEI Number: 20-1137548 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GASSMAN, ALAN S 1245 COURT STREET, SUITE 102 CLEARWATER, FL 33756 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Fitle: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 CAIN, CAROLYN S MD
 Name:
 CAIN, CAROLYN S MD

 Address:
 2775 SW 53RD STREET
 Address:
 2775 SW 53RD STREET

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:
 OCALA, FL 34471

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: CAROLYN SCOTT CAIN PRES 01/08/2008