03-31-2008 90267 020 ***138.50
L04000044425

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000044425

1. Entity Name
FAMILY MEDICINE SPECIALISTS, PLLC

FILED
08 APR 21 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
600018257

Principal Place of Business	Mailing Address
7978 COOPER CREEK BLVD. SUITE 210 BRADENTON, FL 34201	7978 COOPER CREEK BLVD. SUITE 210 BRADENTON, FL 34201

DO NOT WRITE IN THIS SPACE

02112008No Chg-LLC CR2E083 (12/07)

4. FEI Number
20-1260394
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BLALOCK, WALTERS, HELD & JOHNSON, P.A.
802 11TH STREET WEST
BRADENTON, FL 34205

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Michael J. Bentze 3/24/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	BENTZE, MICHAEL
STREET ADDRESS	13369 PURPLE FINCH CIRCLE
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	MGRM
NAME	BENTZE, NICOLE
STREET ADDRESS	13369 PURPLE FINCH CIRCLE
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Michael J. Bentze 3/24/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #