

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056611

FILED
Apr 05, 2008
Secretary of State

Entity Name: GONZALEZ FAMILY ENTERPRISES, LLC

Current Principal Place of Business:

1155 LOUISIANA AVENUE
SUITE 100
WINTER PARK, FL 32789

New Principal Place of Business:

412 CAMELIA TRAIL
ST.AUGUSTINE, FL 32086

Current Mailing Address:

1155 LOUISIANA AVENUE
SUITE 100
WINTER PARK, FL 32789

New Mailing Address:

412 CAMELIA TRAIL
ST.AUGUSTINE, FL 32086

FEI Number: 20-1537103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHEELER, KENNETH B
1155 LOUISIANA AVE.
SUITE 100
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

GONZALEZ, LEOPOLDO B PRES.
412 CAMELIA TRAIL
ST. AUGUSTINE, FL 32086 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: LEOPOLDO B. GONZALEZ, M.D

04/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GONZALEZ, LEOPOLD B
Address: 412 CAMELIA TRAIL
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GONZALEZ, LEOPOLDO B PRES.
Address: 412 CAMELIA TRAIL
City-St-Zip: ST AUGUSTINE, FL 32086

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: LEOPOLDO B. GONZALEZ, M.D.

PRES

04/05/2008

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