

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065672

FILED
Apr 10, 2007
Secretary of State

Entity Name: TERRENCE S. DELIKAT, DO, P.L.

Current Principal Place of Business:

7022 CASCADE COURT
LAKELAND, FL 33813

New Principal Place of Business:

5111 DUNHAM CREEK PLACE
BRANDON, FL 33511

Current Mailing Address:

7022 CASCADE COURT
LAKELAND, FL 33813

New Mailing Address:

5111 DUNHAM CREEK PLACE
BRANDON, FL 33511

FEI Number: 32-0090580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLOCK, DAVID D JR
ONE LAEK MORTON DRIVE
LAKELAND, FL 33801 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: DELIKAT, TERRENCE S
Address: 7022 CASCADES CT
City-St-Zip: LAKELAND, FL 33813 US

Title: MGRM () Delete
Name: DELIKAT, JEMY M
Address: 7022 CASCADESCT
City-St-Zip: LAKELAND, FL 33813 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DELIKAT, TERRENCE S
Address: 5111 DUNHAM CREEK PLACE
City-St-Zip: BRANDON, FL 33511 US

Title: MGRM (X) Change () Addition
Name: DELIKAT, JEMY M
Address: 5111 DUNHAM CREEK PLACE
City-St-Zip: BRANDON, FL 33511 US

I hereby certify that the information supplied with this filing does not qualify for the 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: TERRENCE S DELIKAT

MGR

04/10/2007

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