

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067389

**FILED
Feb 15, 2010
Secretary of State**

Entity Name: LOUIS AVILES, M.D., PL

Current Principal Place of Business:

1007 JEFFORDS STREET
#102
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

1007 JEFFORDS STREET
#102
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 20-1597375 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MARQUARDT, EMIL C JR
625 COURT STREET, SUITE 200
CLEARWATER, FL 33756 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: MGRM
Name: AVILES, LOUIS M.D.
Address: 2802 BLUFFS DRIVE
City-St-Zip: LARGO, FL 33770

I hereby 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: LOUIS AVILES M.D. DR. 02/15/2010

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