

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067389

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

FILED  
Jan 04, 2012  
Secretary of State

**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

PRES

01/04/2012

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