

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072667

FILED
Jun 16, 2009
Secretary of State

Entity Name: THE INSTITUTE FOR FOOT & ANKLE SURGERY, P.L.L.C.

Current Principal Place of Business:

917 RINEHART ROAD
SUITE 2061
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

917 RINEHART ROAD
SUITE 2061
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 20-1717875 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RIVERA, JOSE A DPM
917 RINEHART RD
SUITE 2061
LAKE MARY, FL 32746 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RIVERA, JOSE A DPM
Address: 917 RINEHART RD #2061
City-St-Zip: LAKE MARY, FL 32746

Title: MGRM () Delete
Name: NAVARRO, MARIELLE
Address: 917 RINEHART RD #2061
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RIVERA, JOSE A DPM
Address: 917 RINEHART RD SUITE #2061
City-St-Zip: LAKE MARY, FL 32746

Title: MGRM (X) Change () Addition
Name: NAVARRO, MARIELLE
Address: 917 RINEHART RD SUITE 2061
City-St-Zip: LAKE MARY, FL 32746

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: JOSE RIVERA

MGRM

06/16/2009

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