

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081117

FILED
Aug 02, 2008
Secretary of State

Entity Name: RICHARD M. SLONE, M.D., L.L.C.

Current Principal Place of Business:

521 MANDALAY AVENUE
UNIT 910
CLEARWATER BEACH, FL 33767

New Principal Place of Business:

Current Mailing Address:

521 MANDALAY AVENUE
UNIT 910
CLEARWATER BEACH, FL 33767

New Mailing Address:

PO BOX 3907
CLEARWATER BEACH, FL 33767

FEI Number: 06-1738512 **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:

BATES, LONDON L ESQ.
1245 COURT STREET, SUITE 102
CLEARWATER, FL 33756 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: SLONE, RICHARD M
Address: 521 MANDALAY AVENUE, UNIT 910
City-St-Zip: CLEARWATER BEACH, FL 33767

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD M SLONE

MGR

08/02/2008

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