2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# L04000093271

Entity Name: PAUL GRANIERO, M.D., LC

Current Principal Place of Business:

21178 OLEAN BLVD
SUITE 4
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

2513 AARON ST
PORT CHARLOTTE, FL 33952

Current Mailing Address:

21178 OLEAN BLVD
SUITE 4
PORT CHARLOTTE, FL 33952

New Mailing Address:

2513 AARON ST
PORT CHARLOTTE, FL 33952

FEI Number: 11-1426413 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OAKS, DAVID K
407 EAST MARION AVENUE, SUITE 101
PUNTA GORDA, FL 33950 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: GRANIERO, PAUL
Address: 21178 OLEAN BLVD., SUITE 4
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GRANIERO, PAUL
Address: 2513 AARON ST
City-St-Zip: PORT CHARLOTTE, FL 33952

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: PAUL GRANIERO MGR 04/20/2009

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