2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2010
Secretary of State

DOCUMENT# L05000003099

Entity Name: VASCULAR & INTERVENTIONAL PHYSICIANS LIMITED LIABILITY COMPANY

Current Principal Place of Business:

6716 NW 11TH PLACE
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

6716 NW 11TH PLACE
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 20-2027489 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KIM, JONG H
6716 NW 11TH PLACE
GAINESVILLE, FL 32605 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: WIECHMANN, BRET N
Address: 6716 NW 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

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 Statues.

SIGNATURE: JONG H KIM MGRM 02/05/2010

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