

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025404

FILED
Mar 09, 2009
Secretary of State

Entity Name: PHYSICIANS GROUP, L.L.C.

Current Principal Place of Business:

4054 SAWYER ROAD
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4054 SAWYER ROAD
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 20-3971652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZITANI, GREGORY A
4046 SAWYER ROAD STE D
SARASOTA, FL 34233 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: DR () Delete
Name: KOMPOTHECRAS, GARY
Address: 4054 SAWYER ROAD
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KOMPOTHECRAS, GARY
Address: 4054 SAWYER ROAD
City-St-Zip: SARASOTA, FL 34233

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: GARY KOMPOTHECRAS

MGRM

03/09/2009

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