

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000027830

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Entity Name:** BAY PEDIATRIC GASTROENTEROLOGY, HEPATOLOGY & NUTRITION, P.L.

**Current Principal Place of Business:**

1033 DR MLK JR ST N  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

214 LAKE MANOR ROAD  
CHAPEL HILL, NC 27516

**New Mailing Address:**

**FEI Number:** 52-2453399

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REINSTEIN, L. JULIO  
214 LAKE MANOR ROAD  
CHAPEL HILL, FL 27516 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  
Name: REINSTEIN, L. JULIO  
Address: 214 LAKE MANOR RD  
City-St-Zip: CHAPEL HILL, NC 27516

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 Statutes.

SIGNATURE: LEON REINSTEIN

MGR

02/15/2011

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