

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034155

FILED  
Mar 18, 2011  
Secretary of State

**Entity Name:** FLEMING ISLAND MEDICAL PLAZA II, LLC

**Current Principal Place of Business:**

1689 EAGLE HARBOR PARKWAY  
A  
ORANGE PARK, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

1689 EAGLE HARBOR PARKWAY  
A  
ORANGE PARK, FL 32003

**New Mailing Address:**

**FEI Number:** 76-0789301

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRANT, ABRAHAM, REITER, MCCORMICK & GREENE, P  
50 NORTH LAURA STREET STE 2750  
JACKSONVILLE, FL 32202 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: PD  
Name: GATIEN, LIONEL J PD  
Address: 1689 EAGLE HARBOR PKY EAST STE A  
City-St-Zip: ORANGE PARK, FL 32003

Title: MGR  
Name: ASHCHI, MAJDI MGR  
Address: 1689 EAGLE HARBOR PKY SUITE A  
City-St-Zip: ORANGE PARK, FL 32003

Title: MGR  
Name: MILITELLO, JAMES MGR  
Address: 1689 EAGLE HARBOR PKY EAST  
City-St-Zip: ORANGE PARK, FL 32003

Title: MGR  
Name: MUYRES, WILLIAM  
Address: 1689 EAGLE HARBOR PKY STE A  
City-St-Zip: ORANGE PARK, FL 32003

Title: MGR  
Name: KHATIB, YAZAN MGR  
Address: 1689 EAGLE HARBOR PKY STE A  
City-St-Zip: ORANGE PARK, FL 32003

Title: MGR  
Name: BHATIA, LAKHINDER  
Address: 1689 EAGLE HARBOR PKY  
City-St-Zip: ORANGE PARK, FL 32003

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: LIONEL J GATIEN DO

PD

03/18/2011

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