## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000036590

Entity Name: BAY HILL PSYCHIATRIC ASSOCIATES, LLC

6068 SOUTH APOPKA VINELAND ROAD

ORLANDO, FL 32819

Address:

City-St-Zip:

FILED May 04, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
6068 SOU SUITE 3	ITH APOPKA VINELAND ROAD			
ORLANDO	O, FL 32819			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
SUITE 3	JTH APOPKA VINELAND ROAD O, FL 32819			
In accordan	r: 73-1733607 FEI Number Applied For ( ) nce with s. 607.193(2)(b), F.S., the limited liability c	• •		
Name and	d Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
6068 SOU SUITE 3	URY, TARIK H ITH APOPKA VINELAND ROAD O, FL 32819 US			
	e named entity submits this statement for the e of Florida.	e purpose of changing its registere	ed office or registered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Registered A	gent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM ( ) Delete CHOUDHURY, TARIK H 6068 SOUTH APOPKA VINELAND ROAD ORLANDO, FL 32819	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM ( ) Delete SULTANA. SYEDA N MD	Title: Name:	( ) Change ( ) Addition	

Address:

City-St-Zip:

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: TARIK CHOUDHURY MGRM 05/04/2007