

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000044596

**Entity Name:** RAYMOND A. JAMES, D.O., P.L.

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1089 BAYSHORE DRIVE  
ENGLEWOOD, FL 34223 US

**New Principal Place of Business:**

**Current Mailing Address:**

1089 BAYSHORE DRIVE  
ENGLEWOOD, FL 34223 US

**New Mailing Address:**

**FEI Number:** 20-3056357

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAXSAVERS  
17179 BONNIE AVENUE  
PORT CHARLOTTE, FL 33954 US

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

TAXSAVERS  
1300 ENTERPRISE DRIVE, SUITE A  
PORT CHARLOTTE, FL 33963 US

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:**

04/18/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** JAMES, RAYMOND A D.O.  
**Address:** 1089 BAYSHORE DRIVE  
**City-St-Zip:** ENGLEWOOD, FL 34223

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:** RAYMOND JAMES

MGR

04/18/2011

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