2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000046101

Entity Name: NEUROLOGY PHYSICIANS BUILDING & LAND, LLC

Jan 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1660 MEDICAL BLVD., SUITE 200 8380 RIVERWALK PARK BLVD. NAPLES, FL 34110

320

FORT MYERS, FL 33919

ADDITIONS/CHANGES:

Current Mailing Address: New Mailing Address:

8380 RIVERWALK PARK BLVD. 8380 RIVERWALK PARK BLVD

320

FORT MYERS, FL 33919 FORT MYERS, FL 33919

FEI Number: 20-2805445 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GERBER, MARK B GERBER, MARK B

1660 MEDICAL BLVD., SUITE 200 8380 RIVÉRWALK PARK BLVD NAPLES, FL 34110 320 FORT MYERS, FL 33919 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:

01/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

320

MGMR Title: () Delete (X) Change () Addition

GERBER, MARK Name: GERBER, MARK Name: 670 GOODLETTE ROAD Address: 8380 RIVERWALK PARK BLVD SUITE 320 Address:

City-St-Zip: NAPLES, FL 34102 City-St-Zip: FORT MYERS, FL 33919

Title: MGR () Delete Title: MGR (X) Change () Addition HUSSEY, DESMOND Name: HUSSEY, DESMOND Name:

Address: 670 GOODLETTE ROAD Address: 8380 RIVERWALK PARK BLVD SUITE 320

City-St-Zip: NAPLES, FL 34102 City-St-Zip: FORT MYERS, FL 33919

Title: MGR () Delete Title: MGR (X) Change () Addition KANDEL, JOSEPH KANDEL, JOSEPH Name: Name:

8380 RIVERWALK PARK BLVD SUITE 320 Address: 877 111TH AVENUE NO Address:

City-St-Zip: NAPLES, FL 34108 City-St-Zip: FORT MYERS, FL 33919

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: LUSK, MICHAEL Name: LUSK, MICHAEL

670 GOODLETTE ROAD 8380 RIVERWALK PARK BLVD SUITE 320 Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: FORT MYERS, FL 33919

Title: MGR () Delete Title: MGR (X) Change () Addition MORELL, THOMAS Name: Name: MORELL, THOMAS

8380 RIVERWALK PARK BLVD 8380 RIVERWALK PARK BLVD STE 320 Address: Address:

City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919

Title: () Delete Title: (X) Change () Addition NOVAK, MICHAEL NOVAK, MICHAEL Name: Name:

Address: 1660 MEDICAL BLVD. Address: 8380 RIVERWALK PARK BLVD SUITE 320

NAPLES, FL 34110 City-St-Zip: FORT MYERS, FL 33919 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: MARK B. GERBER MD **MGMR** 01/27/2009