

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000049401

Entity Name: CKLB HOLDINGS, LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

2888 MAHAN DRIVE
STE 3
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2910 CAPITAL MEDICAL BLVD
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 20-2904545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BIRKEDAL, CHRISTIAN MD
5 OAK KNOLL WAY
ORMOND BEACH, FL 32174 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: MGRM () Delete
Name: BIRKEDAL, CHRISTIAN L
Address: 5 OAK KNOLL WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: BIRKEDAL, KRISTIN P
Address: 5 OAK KNOLL WAY
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: CHRISTIAN L BIRKEDAL, MD

MGRM

04/15/2009

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