

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 27, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000053986**

1. Entity Name  
**VILLAGES BONE INSTITUTE, LLC**



Principal Place of Business  
**600 NORTH BLVD. WEST, SUITE C  
LEESBURG, FL 34748**

Mailing Address  
**600 NORTH BLVD. WEST, SUITE C  
LEESBURG, FL 34748**



02082007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-2999203**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**WILLIAMS, ROBERT Q  
380 WEST ALFRED STREET  
TAVARES, FL 32778**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and fee, if applicable. (NOTE: Registered Agent signature required when registering.) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY- ST- ZIP	<b>MGRM HUNTT, H. ANDREW JR 600 NORTH BLVD. WEST, SUITE C LEESBURG, FL 34748</b>
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03/08/07-80011-015 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** *H. Andrew Huntz* **H. ANDREW HUNTT, JR., M.D.** **2-8-2007** **352-728-3000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #