

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055899

FILED
Jan 11, 2007
Secretary of State

Entity Name: DERMATOLOGY AT LAKEWOOD RANCH LLC

Current Principal Place of Business:

8340 LAKEWOOD RANCH BLVD., SUITE 390
BRADENTON, FL 34202

New Principal Place of Business:

Current Mailing Address:

8340 LAKEWOOD RANCH BLVD., SUITE 390
BRADENTON, FL 34202

New Mailing Address:

FEI Number: 20-2956490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARSENAULT, MICHAEL A
8340 LAKEWOOD RANCH BLVD., SUITE 390
BRADENTON, FL 34202 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: ARSENAULT, MICHAEL A
Address: 8340 LAKEWOOD RANCH BLVD, STE 390
City-St-Zip: BRADENTON, FL 34202

Title: MGRM () Delete
Name: ARSENAULT, EMILY E
Address: 8340 LAKEWOOD RANCH BLVD, STE 390
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ARSENAULT, EMILY F
Address: 8340 LAKEWOOD RANCH BLVD, STE 390
City-St-Zip: BRADENTON, FL 34202

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL A. ARSENAULT

MGRM

01/11/2007

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