

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000060350

**FILED**  
**Apr 06, 2010**  
**Secretary of State**

**Entity Name:** CYPRESS RIDGE PROFESSIONAL ASSOCIATES, LLC

**Current Principal Place of Business:**

26827 FOGGY CREEK ROAD  
SUITE 101 A  
WESLEY CHAPEL, FL 33544

**New Principal Place of Business:**

**Current Mailing Address:**

26827 FOGGY CREEK ROAD  
SUITE 101 A  
WESLEY CHAPEL, FL 33544

**New Mailing Address:**

**FEI Number:** 54-2189855      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ROSEQUIST, LINDA C CMM  
1942 HIGHLAND OAKS BLVD  
SUITE A  
LUTZ, FL 33559 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: LINDA ROSEQUIST

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROSEQUIST, LINDA C CMM  
Address: 1942 HIGHLAND OAKS BLVD SUITE A  
City-St-Zip: LUTZ, FL 33559

Title: MGR  
Name: ROSEQUIST, ROBERT B M.D.  
Address: 1942 HIGHLAND OAKS BLVD SUITE A  
City-St-Zip: LUTZ, FL 33559

Title: MGR  
Name: WATKINS, STANLEY E MD  
Address: 1942 HIGHLAND OAKS BLVD SUITE A  
City-St-Zip: LUTZ, FL 33559

Title: MGR  
Name: LEVIN, STEPHEN DRM  
Address: 26827 FOGGY RIDGE ROAD SUITE 104 D  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: MGRM  
Name: WATKINS, CHRISTINE  
Address: 1942 HIGHLAND OAKS BLVD SUITE A  
City-St-Zip: LUTZ, FL 33559

Title: MGRM  
Name: LEVIN, DIANE  
Address: 26827 FOGGY CREEK ROAD SUITE 104 D  
City-St-Zip: WESLEY CHAPEL, FL 33544

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: LINDA ROSEQUIST

MGR

04/06/2010

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