## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000063162

Entity Name: THOMAS STAKEM, DDS, MD, LLC

FILED Mar 05, 2009 Secretary of State

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

7175-01 US HIGHWAY 17 SOUTH
GREEN COVE SPRINGS, FL 32043 US
7175-01 US HIGHWAY 17 SOUTH
FLEMING ISLAND, FL 32003 US

Current Mailing Address: New Mailing Address:

7175-01 US HIGHWAY 17 SOUTH 7175-01 US HIGHWAY 17 SOUTH GREEN COVE SPRINGS, FL 32043 US FLEMING ISLAND, FL 32003 US

FEI Number: 43-2085242 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STAKEM, THOMAS E
7175-01 US HIGHWAY 17 SOUTH
7175-01 US HIGHWAY 17 SOUTH
GREEN COVE SPRINGS, FL 32043 US
7175-01 US HIGHWAY 17 SOUTH
FLEMING ISLAND, FL 32003 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: 03/05/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name:STAKEM, THOMAS EName:STAKEM, THOMAS EAddress:7175-01 US HIGHWAY 17 SOUTHAddress:7175-01 US HIGHWAY 17 SOUTHCity-St-Zip:GREEN COVE SPRINGS, FL 32043 USCity-St-Zip:FLEMING ISLAND, FL 32003 US

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: THOMAS STAKEM MGR 03/05/2009