

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000063245

Entity Name: JOHN W. TYRONE, MD, PLLC

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

6520 NW 9TH BLVD.
GAINESVILLE, FL 32605

New Principal Place of Business:

1204 NW 69TH TER
SUITE F
GAINESVILLE, FL 32605

Current Mailing Address:

3918 SW 92ND TERRACE
GAINESVILLE, FL 32608

New Mailing Address:

1204 NW 69TH TER
SUITE F
GAINESVILLE, FL 32605

FEI Number: 20-3055267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TYRONE, JOHN W
3918 SW 92ND TERRACE
GAINESVILLE, FL 32608 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: TYRONE, JOHN W
Address: 3918 SW 92ND TERRACE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES:

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

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: JOHN W TYRONE

MGR

01/04/2007

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