

# **2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000065438

**FILED**  
**Aug 04, 2010**  
**Secretary of State**

**Entity Name:** KASIA OSADZINSKA, M.D., PL

**Current Principal Place of Business:**

6808 SPICEWOOD LANE  
TALLAHASSEE, FL 32312 US

**New Principal Place of Business:**

2955 ENTERPRISE ROAD  
B  
DEBARY, FL 32713 US

**Current Mailing Address:**

6808 SPICEWOOD LANE  
TALLAHASSEE, FL 32312 US

**New Mailing Address:**

2955 ENTERPRISE ROAD  
B  
DEBARY, FL 32713 US

**FEI Number:** 20-3084714

**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:**

OSADZINSKA, KASIA M.D.  
503 MOCKINGBIRD COURT  
LAKE MARY, FL 32746 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:** KASIA OSADZINSKA

08/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** OSADZINSKA, KASIA M.D.  
**Address:** 2955 ENTERPRISE ROAD, SUITE B  
**City-St-Zip:** DEBARY, FL 32713

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:** KASIA OSADZINSKA

P

08/04/2010

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