

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000078522

**FILED**  
**Jan 10, 2010**  
**Secretary of State**

**Entity Name:** FREDESVINDA JACOBS-ALVAREZ, M.D., PLLC

**Current Principal Place of Business:**

8751 COMMODITY CIRCLE, SUITE 7  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

8751 COMMODITY CIRCLE  
SUITE 7  
ORLANDO, FL 32819 US

**Current Mailing Address:**

8751 COMMODITY CIRCLE, SUITE 7  
ORLANDO, FL 32819 US

**New Mailing Address:**

8751 COMMODITY CIRCLE,  
SUITE 7  
ORLANDO, FL 32819 US

**FEI Number:** 20-3299937

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACOBS-ALVAREZ, FREDESVINDA  
8751 COMMODITY CIR STE 7  
ORLANDO, FL 32817 US

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

JACOBS-ALVAREZ, FREDESVINDA  
8751 COMMODITY CIR STE 7  
ORLANDO, FL 32819 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:

01/10/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: JACOBS-ALVAREZ, FREDESVINDA  
Address: 8751 COMMODITY CIRCLE, SUITE 7  
City-St-Zip: ORLANDO, FL 32819 US

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: FREDESVINDA JACOBS-ALVAREZ

CEO

01/10/2010

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