

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096554

Entity Name: HIPPALGAONKAR LBB, LLC

FILED
Apr 10, 2007
Secretary of State

Current Principal Place of Business:

1061 MEDICAL CENTER DRIVE STE 101
ORANGE CITY, FL 32763

New Principal Place of Business:

932 SAXON BLVD, SUITE A
ORANGE CITY, FL 32763

Current Mailing Address:

1061 MEDICAL CENTER DRIVE STE 101
ORANGE CITY, FL 32763

New Mailing Address:

932 SAXON BLVD, SUITE A
ORANGE CITY, FL 32763

FEI Number: 20-3539431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIPPALGAONKAR, RAJENDRA MD
1061 MEDICAL CENTER DRIVE STE 101
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

HIPPALGAONKAR, RAJENDRA MD
932 SAXON BLVD, SUITE A
ORANGE CITY, FL 32763 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: R. HIPPALGAONKAR

04/10/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: HIPPALGAONKAR, RAJENORA DR. MD
Address: 1061 MEDICAL CENTER DR.
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: HIPPALGAONKAR, RAJENORA DR. MD
Address: 932 SAXON BLVD, SUITE A
City-St-Zip: ORANGE CITY, FL 32763

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: RAJENDRA HIPPALGAONKAR

P

04/10/2007

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