

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096554

Entity Name: HIPPALGAONKAR LBB, LLC

FILED
Mar 10, 2008
Secretary of State

Current Principal Place of Business:

932 SAXON BLVD, SUITE A
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

932 SAXON BLVD, SUITE A
ORANGE CITY, FL 32763

New Mailing Address:

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
932 SAXON BLVD, SUITE A
ORANGE CITY, FL 32763 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: P () Delete
Name: HIPPALGAONKAR, RAJENDRA DR. MD
Address: 932 SAXON BLVD, SUITE A
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES:

Title: DR (X) Change () Addition
Name: HIPPALGAONKAR, RAJENDRA 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 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

DR

03/10/2008

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