

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105862

FILED
May 07, 2008
Secretary of State

Entity Name: ANNETTE CARTER, M.D., P.L.

Current Principal Place of Business:

1243 MAIN ST.
CHIPLEY, FL 32428

New Principal Place of Business:

Current Mailing Address:

1243 MAIN ST.
CHIPLEY, FL 32428

New Mailing Address:

FEI Number: 20-3712140 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CARTER, ANNETTE
1243 MAIN ST.
CHIPLEY, FL 32428 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MD () Delete
Name: CARTER, ANNETTE MD
Address: 1243 MAIN ST.
City-St-Zip: CHIPLEY, FL 32428 US

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 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: ANNETTE CARTER

CEO

05/07/2008

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