2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000110881

11606 TWIN CREEKS DR

City-St-Zip: FORT PIERCE, FL 34981 US

Address:

Entity Name: CHEYNE PROFESSIONAL COMPLEX, LLC

FILED Jan 23, 2009 Secretary of State

Current	Principal Place	of Business:	New Principal Place	New Principal Place of Business:	
	25TH STREET CE, FL 34981				
Current Mailing Address:			New Mailing Address:		
	25TH STREET CE, FL 34981				
FEI Numbe	er: 51-0620352	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
5050 S. 2	E, GORDON G 25TH STREET CE, FL 34981	US			
	ve named entity s ite of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both	
SIGNATU	JRE:				
Electronic Signature of Registered Age			ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title:	DR. ()	Delete	Title:	() Change () Addition	

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: GORDON CHEYNE DR. 01/23/2009