

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000117022

Entity Name: PEDIATRIC SERVICES, LLC

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

9800 SOUTH HEALTHPARK DRIVE
102
FORT MYERS, FL 33908

Current Mailing Address:

9800 SOUTH HEALTHPARK DRIVE
102
FORT MYERS, FL 33908

New Principal Place of Business:

9800 SOUTH HEALTHPARK DRIVE
145
FORT MYERS, FL 33908

New Mailing Address:

9800 SOUTH HEALTHPARK DRIVE
145
FORT MYERS, FL 33908

FEI Number: 84-1697162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADLER, NATHAN J
8695 COLLEGE PARKWAY
112
FORT MYERS, FL FL 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: MGR () Delete
Name: GANATRA, JAYSHREE
Address: 9800 SOUTH HEALTHPARK DRIVE #102
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM () Delete
Name: BOURGON, PIERRE
Address: 9800 SOUTH HEALTHPARK DRIVE #102
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM (X) Delete
Name: ROSIORU ROSS, CHRISTIAN
Address: 9800 SOUTH HEALTHPARK DRIVE #102
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROSIORU ROSS, CHRISTIAN
Address: 9800 SOUTH HEALTHPARK DRIVE #145
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM (X) Change () Addition
Name: BOURGON, PIERRE
Address: 9800 SOUTH HEALTHPARK DRIVE #145
City-St-Zip: FORT MYERS, FL 33908

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: CHRISTIAN ROSIORU ROSS

MGRM

03/17/2009

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