## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000000153

Address:

City-St-Zip:

11939 ROYCE WATERFORD CIR

TAMPA, FL 33626

Entity Name: RIVER JORDAN CARDIOVASCULAR HEALTH, LLC

FILED Apr 27, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 202 S ROME AVE 11939 ROYCE WATERFORD CIR SUITE 100 TAMPA, FL 33626 TAMPA, FL 33606 **Current Mailing Address: New Mailing Address:** 202 S ROME AVE 11939 ROYCE WATERFORD CIR SUITE 100 TAMPA, FL 33626 TAMPA, FL 33606 FEI Number: 20-5867633 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERRENTINO, DAVID D ESQ. 202 S ROME ÁVE SUITE 100 TAMPA, FL 33606 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CRALL, ERIC Name: Name: Address: 11939 ROYCE WATERFORD CIR Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: CRALL, KARA 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: ERIC J CRALL DR. 04/27/2008