

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000411

FILED
Mar 17, 2011
Secretary of State

Entity Name: ALTAMONTE PEDIATRIC ASSOCIATES REAL ESTATE, L.L.C.

Current Principal Place of Business:

475 OSCEOLA STREET
SUITE 1100
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

Current Mailing Address:

475 OSCEOLA STREET
SUITE 1100
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

FEI Number: 59-3098901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFKOWITZ, IVAN M
430 N MILLS AVE
ORLANDO, FL 32803 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
Name: ZISSMAN, EDWARD N
Address: 475 OSCEOLA STREET, #1100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: MGR
Name: SOVEN, WAYNE D
Address: 475 OSCEOLA STREET, #1100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: MGR
Name: HARRIS, BRIAN E
Address: 475 OSCEOLA STREET, #1100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: MGR
Name: ALBERT, STEPHEN R
Address: 475 OSCEOLA STREET, #1100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

I hereby 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: EDWARD ZISSMAN

MGR

03/17/2011

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