2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2008
Secretary of State

DOCUMENT# L06000005875

Entity Name: DAN T. TUDOR, M.D., P.L.

Current Principal Place of Business:

210 E. COMMERCIAL STREET
SANFORD, FL 32771

New Principal Place of Business:

419 E. 1ST STREET
SANFORD, FL 32771

Current Mailing Address:

210 E. COMMERCIAL STREET
SANFORD, FL 32771

New Mailing Address:

P.O. BOX 1881
SANFORD, FL 32772

FEI Number: 41-2193768 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOGNER, JAMES B
C/O MATEER & HARBERT, P.A.
225 E. ROBINSON STREET, SUITE 600
ORLANDO, FL 32801 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: MGRM ( ) Delete
Name: TUDOR, DAN T M.D.
Address: 210 E. COMMERCIAL STREET
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: TUDOR, DAN T M.D.
Address: 419 E. 1ST STREET
City-St-Zip: SANFORD, FL 32771

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: DAN T TUDOR, M.D. MGRM 02/04/2008

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