2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011482

Entity Name: ALDEN POSNER ZWERLING MD, LLC

FILED Aug 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1012 STACEY LANE 308 PALMETTO STREET

NEW SMYRNA BEACH, FL 32168 NEW SMYRNA BEACH, FL 32168

Current Mailing Address: New Mailing Address:

1012 STACEY LANE 5561 MAGNOLIA AVE PORT ORANGE, FL 32127 NEW SMYRNA BEACH, FL 32168

FEI Number: 20-4223757 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ZWERLING, ALDEN P ZWERLING, ALDEN P 5561 MAGNOLIA AVE 1012 STACÉY LANE

NEW SMYRNA BEACH, FL 32168 US PORT ORANGE, FL 32127 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:

08/12/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: (X) Change () Addition () Delete

ZWERLING, ALDEN P ZWERLING, ALDEN P Name: Name: Address: 1012 STACEY DRIVE Address: 5561 MAGNOLIA AVE City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: PORT ORANGE, FL 32127

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: ALDEN P ZWERLING MD 08/12/2008