

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000019582

FILED
Jul 29, 2009
Secretary of State**Entity Name:** HANCOCK PROFESSIONAL CENTER, LLC**Current Principal Place of Business:**8140 COLLEGE PARKWAY
105
FORT MYERS, FL 33919 US**New Principal Place of Business:****Current Mailing Address:**8140 COLLEGE PARKWAY
105
FORT MYERS, FL 33919 US**New Mailing Address:****FEI Number:** 20-4361271**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DEAN, CONSTANCE A
8140 COLLEGE PARKWAY
105
FORT MYERS, FL 33919 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: MEYER, MARTIN S
Address: 8140 COLLEGE PARKWAY #105
City-St-Zip: FORT MYERS, FL 33919 US**Title:** MGRM (X) Delete
Name: BAKER, LAURA L
Address: 19650 PINE ECHO ROAD
City-St-Zip: N. FORT MYERS, FL 33917 US**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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: M. MEYER

MGRM

07/29/2009

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