

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000026260

Entity Name: 3201 MEDICAL WAY, L.L.C.

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6325 U.S. HIGHWAY 27 NORTH, SUITE 201  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

6325 U.S. HIGHWAY 27 NORTH, SUITE 201  
SEBRING, FL 33870

**New Mailing Address:**

FEI Number: 16-1770586

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GASSMAN, ALAN S  
1245 COURT STREET, SUITE 102  
CLEARWATER, FL 33756 US

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

SONNI, ASHOK MD  
6325 US HIGHWAY 27 NORTH  
SUITE 201  
SEBRING, FL 33870 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: ASHOK SONNI

02/07/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SONNI, ASHOK M.D.  
Address: 6325 US HIGHWAY 27 N STE 201  
City-St-Zip: SEBRING, FL 33870

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: ASHOK SONNI

MGR

02/07/2011

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