

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045499

FILED
Apr 30, 2008
Secretary of State

Entity Name: PINELLAS COUNTY SPINAL DECOMPRESSION, LLC.

Current Principal Place of Business:

410 150TH AVE.
SUITE B & C
MADEIRA BEACH, FL 33708

New Principal Place of Business:

Current Mailing Address:

410 150TH AVE.
SUITE B & C
MADEIRA BEACH, FL 33708

New Mailing Address:

FEI Number: 42-1703727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAHRER, DESTINY N
1800 49TH AVE N
ST. PETERSBURG, FL 33714 US

Name and Address of New Registered Agent:

RAHRER, DESTINY N
15301 HARBOR DR
MADEIRA BEACH, FL 33708 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:

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RAHRER, DESTINY N
Address: 1800 49TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33714

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RAHRER, DESTINY N
Address: 15301 HARBOR DR
City-St-Zip: MADEIRA BEACH, FL 33708

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: DESTINY RAHRER

MNGR

04/30/2008

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