

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000053012

FILED
Jun 22, 2009
Secretary of State**Entity Name:** FLORIDA SPINE PROPERTIES, LLC**Current Principal Place of Business:**2250 DREW STREET
CLEARWATER, FL 33765**New Principal Place of Business:****Current Mailing Address:**2250 DREW STREET
CLEARWATER, FL 33765**New Mailing Address:****FEI Number:** 20-5216992**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TORRES, FRANCISCO M
2250 DREW STREET
CLEARWATER, FL 33765 US**Name and Address of New Registered Agent:**BURCH, TODD
2250 DREW STREET
CLEARWATER, FL 33765 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: TODD BURCH

06/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGR () Delete
Name: TORRES, FRANCISCO MD
Address: 2250 DREW STREET
City-St-Zip: CLEARWATER, FL 33765Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: MGR (X) Change () Addition
Name: BURCH, TODD
Address: 2250 DREW STREET
City-St-Zip: CLEARWATER, FL 33765Title: MGR () Change (X) Addition
Name: DUNN, KIM
Address: 2250 DREW STREET
City-St-Zip: CLEARWATER, FL 33765

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: TODD BURCH

MGR

06/22/2009

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