

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000055699

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** UNIVERSITY PROFESSIONAL BUILDING LLC

**Current Principal Place of Business:**

550 E. STATE ROAD 434  
LONGWOOD, FL 32750

**New Principal Place of Business:**

235 NORTH WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

550 E. STATE ROAD 434  
LONGWOOD, FL 32750

**New Mailing Address:**

235 NORTH WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 20-8179850

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

AM&E SERVICES LLC  
605 EAST ROBINSON STREET SUITE 730  
ORLANDO, FL 32801 US

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

PA MANAGEMENT LLC  
235 NORTH WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714 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: DENNIS J. BUHRING

04/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BUHRING, DENNIS J  
Address: 235 NORTH WESTMONTE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR  
Name: ZINKOVICH, LINDA  
Address: 235 NORTH WESTMONTE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: DENNIS J. BUHRING

MGR

04/29/2010

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