

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056556

FILED
Mar 20, 2010
Secretary of State

Entity Name: THE MEDICAL PRACTICES OF LENHOLT AND SCHLOSSBERG, P.L.

Current Principal Place of Business:

2230 VENETIAN COURT
SUITE 2
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2230 VENETIAN COURT
SUITE 2
NAPLES, FL 34109

New Mailing Address:

FEI Number: 30-0369218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINCK, LINDA R
5801 PELICAN BAY BLVD., SUITE 300
C/O PORTER, WRIGHT, MORRIS
NAPLES, FL 341082709 US

Name and Address of New Registered Agent:

MINCK, LINDA R
9132 STRADA PLACE, THIRD FLOOR
C/O PORTER, WRIGHT, MORRIS
NAPLES, FL 34108 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:

03/20/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: DR.
Name: LENHOLT, LAURA S
Address: 8958 LELY ISLAND CIRCLE
City-St-Zip: NAPLES, FL 34113

Title: DR.
Name: SCHLOSSBERG, LEONARD A
Address: 2038 SEVILLA WAY
City-St-Zip: NAPLES, FL 34109

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: LAURA S. LENHOLT, MD

MEMB

03/20/2010

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