

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000068747

FILED
Jan 05, 2010
Secretary of State

Entity Name: NEPHROLOGY CONSULTANTS OF JACKSONVILLE, LLC

Current Principal Place of Business:

3129 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

3129 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 20-5209711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, R. GLENN M.D.
3129 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MD
Name: DAVIS, R. GLENN M.D.
Address: 3129 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

Title: MD
Name: GREGORY, LOUIS F M.D.
Address: 3129 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

Title: MD
Name: WASILUK, ANDREW M.D.
Address: 3129 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

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: R. GLENN DAVIS

MD

01/05/2010

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