

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000080069

FILED
Jan 05, 2011
Secretary of State

Entity Name: SOUTHWEST FLORIDA RHEUMATOLOGY, LLC

Current Principal Place of Business:

11952 BOYETTE ROAD
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2779
RIVERVIEW, FL 33568

New Mailing Address:

FEI Number: 20-5385480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDDY, SHANMUGAPRIYA
15215 MERLINGLEN PLACE
LITHIA, FL 33547 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: MGRM
Name: REDDY, SHANMUGAPRIYA
Address: 11952 BOYETTE ROAD
City-St-Zip: RIVERVIEW, FL 33569

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: SHANMUGAPRIYA

MGRM

01/05/2011

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