

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000084610

**Entity Name:** PETER A. SANTISI, O.D., P.L.

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

950 NORTH COURTENAY PARKWAY  
SUITE 12  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

1075 NEW HAMPTON WAY  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

**FEI Number:** 20-5518729

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOVER, GARY C.P.A.  
360 TANGERINE AVENUE  
MERRITT ISLAND, FL 32953 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:** SANTISI, PETER A O.D.  
**Address:** 1075 NEW HAMPTON WAY  
**City-St-Zip:** MERRITT ISLAND, FL 32953

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: PETER A SANTISI

MM

04/19/2011

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