

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000093626

FILED
Apr 20, 2009
Secretary of State

Entity Name: ORANGE PARK SLEEP CENTER, L.L.C.

Current Principal Place of Business:

1125 NORTH SUMMIT STREET
CRESENT CITY, FL 32112

New Principal Place of Business:

Current Mailing Address:

1125 NORTH SUMMIT STREET
CRESENT CITY, FL 32112

New Mailing Address:

FEI Number: 02-0787939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUTLER, WILLIAM E
1125 NORTH SUMMIT STREET
CRESENT CITY, FL 32112 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: MGRS () Delete
Name: BUTLER, WILLIAM E
Address: 1125 NORTH SUMMIT STREET
City-St-Zip: CRESENT CITY, FL 32112

Title: MGRV () Delete
Name: FLETCHER, WARREN D
Address: 1125 N SUMMIT ST
City-St-Zip: CRESCENT CITY, FL 32112

Title: MGRP () Delete
Name: HOWARD, KENNETH P
Address: 16164 NE 15TH PL
City-St-Zip: STARKE, FL 32091

Title: MGRV () Delete
Name: AWTIN, MATTHEW M
Address: 5585 BROKTON WEST GREEN HWY
City-St-Zip: BROXTON, GA 31519

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRV (X) Change () Addition
Name: AUSTIN, MATTHEW M
Address: 5585 BROKTON WEST GREEN HWY
City-St-Zip: BROXTON, GA 31519

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: WILLIAM E. BUTLER

MGRS

04/20/2009

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